

Organ Donation and Transplantation – is it a Good Idea?

By Vibka Wallder

According to the International Registry of Organ Donation & Transplantation, Australia is currently ranked seventeenth in the world when it comes to donating organs. Organisations like Donate Life and Transplant Australia would like to change that, because one organ and tissue donor can save the lives of up to ten people and significantly improve the lives of dozens more. Strong campaigning by these organisations over the last few years has seen donor rates increase every year, but more donors are always needed. Organs that are being transplanted the most are kidneys, livers, hearts, heart/lungs, pancreases, pancreatic islets, and intestines, which have given many people a second chance in this life. In order to entice us to become organ donors, both organisations do their utmost to dispel some fears surrounding organ donation, and they make organ donation look like the greatest gift we could give to others. So why would we perhaps not want to be good Samaritans and bring hope to others?

To answer this I would like to present some different perspectives regarding organ donation and transplantation. The first one is from the viewpoint of the donor. Many people are afraid of entering the donor register, because they wonder whether the doctors will know that they are really dead. In answer to this, Donate Life states that the organs will not be removed until two senior doctors have separately tested that the person is brain dead. The clinical tests for brain death establish that there is no brain function and no blood flow to the brain. At this point, there is no possibility that the brain will ever function again. But does that mean the person is really dead? Why then do doctors have to anaesthetise a brain dead person before harvesting the organs? And what do the doctors know about the spiritual consciousness and the requirements for its evolution?

In his book "Wiedergeburt, Leben, Sterben, Tod und Trauer" [Reincarnation, Life, Dying, Death and Grief; only available in German] Billy Meier explains the difference between clinical death and biological death. Clinical death means that the breathing, heart activity and brain activity are reduced to such an extent that even an EEG cannot pick it up, which is then called zero line EEG. But with that the state of "Tiefst-Agonie" (deepest death throes) has not been reached, which means that the spirit form and the consciousness-block¹ have not yet left the Superior Colliculus and disappeared into their respective realms in the other world; therefore the body can be revived through cardio-pulmonary resuscitation. Biological death, on the other hand, means that a complete and irreversible cessation of brain function has occurred and that the spirit form and the consciousness block have left the Superior Colliculus, which means all body functions cease and the body cannot be revived.

Billy further explains that we have no right to interfere with our natural, biological death, because we bear the responsibility for our life and must fulfil our evolutive duty until our last breath. We must do our utmost to reach the end of our natural life span and to die with dignity. Therefore we must not shorten our lives by unnatural means like suicide and euthanasia or by sending a brain dead person to theatre and harvesting the organs, which will then cause the biological death.

To help a person die with dignity, we need to create a quiet, peaceful, and harmonious environment within ourselves and around the dying person, because during the dying phase the human being is extremely sensitive and marked by a high-grade "Feinfühligkeit" (fine-sensitivity), through which he/she even perceives stirrings of the feelings that are transmitted from persons standing around. Therefore we need to be extremely careful with our thoughts and feelings and control them well if we are near a dying person. And great care must be taken that wailing,

¹ Block of consciousness capacity - not to be confused with 'blockage'!

speaking or any other noises are avoided under all circumstances in order not to disturb the peaceful mystery of dying, into which the consciousness of the dying human being enters or has already entered. Billy states that in fact it must be viewed as deliberate cruelty when a human being in the dying state is disturbed by anything or it is attempted to call him/her back into the acute consciousness. Therefore I consider it cruel and in breach of our evolutionary duty to take a brain dead person to theatre to harvest his/her organs. It does not give the dying person the quiet, peace and dignity that he/she deserves and that we owe them out of respect.

From my own experience as a nurse in palliative care I know that it can sometimes be very difficult for a dying person to leave his/her body, when the family or loved ones are gathered around the bed, talking and crying, and not ready to let go. I have had the privilege to be there when a female resident took her last breath. When her two adult sons informed me that they were just going to the canteen for dinner, because they had been by her bedside all day, I promised them that I would stay with their mother and look after her. This I did by sitting down next to her, gently taking her hand into mine, leaning close to her ear and whispering "you can let go now, the boys will be fine". The peace and quiet, together with the permission to let go, was enough for her consciousness to leave her body that was worn out.

Naturally I have asked myself the question, what I would do if it was my husband or one of our sons on the death bed, who may have signed the donor register. The answer is that I would not allow any medical transplant team near his body or even into the room until I am satisfied that he has reached his biological death. Until then I would do my utmost to create a peaceful, quiet environment, so he can die in peace. And I hope that the people around me at the time of my death will allow me to die with dignity and reach the natural end of my life. Once the spirit form and the overall consciousness-block have left my body, I don't mind if organs and tissues are taken and given to someone who can use them and really wants them.

That brings us to the other side of organ transplantation: the recipient. What happens to the recipient when he/she receives an organ from another human being?

In book 10 of the Pleiadian-Plejaran contact reports (pages 3-8) Billy explains that organ transplantation from one human being to another truly is not a harmless matter, which, unfortunately, is assumed by the doctors. The truth is that the body's own mental fluidal-powers or mental vibrations are so massive, that they are deposited or stored very strongly in all organs. The mental fluidal-powers contain within their energy and power everything that is generated by the mental-block² as well as by the personality and the character. Thus not only the energy and power of the thoughts and feelings as well as the psyche and the consciousness are included in it, but also the hopes, wishes, habits, characteristics and so forth of the human being, which completely deposit themselves in the body and in all its organs. This information of the mental block is deposited in the body organs and in the whole cell system within seconds, thus an 'organic memory' or a 'cellular memory' is created. Therefore if a transplant from one human being to another is carried out, the stored mental cellular information is also transferred, and in fact not just into the whole of the body but also into the brain and consciousness of the organ recipient. Sooner or later, without fail, this reveals itself in such a form that the person, into whom a foreign organ was implanted, adopts characteristics and behaviour patterns and even the ways of thinking etc. of that human being who acted as a donor of the organ or bone.

Billy further explains that not all organs and cells are equally powerful concerning the storage of the mental information. The strongest organ with regard to the storage of mental vibrations, energy, power and information is the heart, after which then all other important life organs follow. And because the mental storage of information in the organs and cells happens within seconds, it becomes clear that frightful experiences - for example a violent, sudden death - are still transferred and stored. As a result of that, the relevant impulses are transferred to the human being who receives the organ transplant. Thus it follows that organ transplants are never harmless, no matter which organ or bone it concerns, because even an eye or a finger produces

² Not to be confused with blockage.

its effect in regards to the mental fluidal force. Implanted organs and bones induce, in any case, some smaller or bigger changes in the organ recipient, whereby in the worst case scenarios, glaring personality changes appear in the form that the organ recipient takes over the personality traits of the organ-donating person. Therefore it is possible, for example, that a human being, who has the heart of a murderer implanted, in like circumstances becomes a murderer himself. These are facts which are still denied today by doctors and others, however, time will prove that it is true and is neither abnormal nor esoteric theory nor nonsense.

And this truth, explained above by Billy, seems to be confirmed by Paul Pearsall in his book, "The Heart's Code". During a conference in Houston, Texas, Pearsall spoke about the concept of cellular memory. Another psychiatrist came to the microphone and as an example for this concept relayed the story of an eight-year old girl, who had received the heart of a murdered ten-year old girl. Her mother had taken her to the psychiatrist when she started screaming at night about her dreams of the man who had murdered her donor. The mother said her daughter knew who it was. After several sessions, the psychiatrist could not deny the reality of what this child was telling her. She and the mother finally decided to call the police and, using the descriptions from the little girl, they found the murderer. He was easily convicted with the evidence the patient provided. The time, the weapon, the place, the clothes he wore, what the victim he killed had said to him....everything the little heart transplant recipient reported was completely accurate.

Pearsall also interviewed Claire Sylvia, a heart-lung transplant recipient, who has described her experiences in detail in the book "A change of heart", written by Bill Novak. Apparently, when Claire woke up from her anaesthetic, she felt a strong craving for beer and hamburgers, which she had rarely consumed before. She found out that her organ donor had been a young man, who was killed riding his motor bike, and who had been very fond of hamburgers and beer. Since the transplant operation Claire has also had accurate dreams about her donor, changes in her style of dancing, and many other changes, which seem to confirm what Billy explained about cellular memory.

Therefore I asked myself whether I would want an organ transplant, and the answer is an emphatic NO, thank you! I have enough issues of my own to work through in this life. I do not need someone else's problems, cravings, or bad habits on top of that. It is already difficult enough to hedge myself off against external influences and to listen to my inner self in order to pick up the impulses that come from my subconsciousness, and which help my material consciousness, that is to say my personality, in its development. If I then got the cellular information of a donated organ on top of that it could be compared with a radio that is not tuned in properly, and as a result of it the broadcasting or the clear transmission of the program is interfered with to a greater or lesser extent.

I will do my best to keep this body healthy and functioning for as long as possible to give the spirit form, which resides within me, the best possible evolution in this life. And if I were to develop a liver-destroying disease tomorrow I would be happy to accept it and die from it, because I know that death is nothing but another phase in the evolution of the spirit form that resides within me. Death and life are two different worlds that belong together; one always follows the other, like night follows the day and another day follows the night.

Sadly there is an even darker side in relation to organ donation and transplantation. Many human beings on this planet believe that they have only one life, and they desperately cling to it. And because of that they are prepared to pay a lot of money for an organ that could extend their life. From that a lucrative business has grown, and the horrors which are exercised in China, for example, are even more awful than is known in the public media. In the 256th contact from 13 May 1996, Billy and Ptaah speak about practices in China, which are below all human dignity and humanity. According to Ptaah, on a huge scale, people are sentenced to death by official courts and are executed, only for the authorities to get their hands on the organs of the killed ones, which are then sold for serious money and transplanted into someone solvent. Thereby, it does not matter whether the convicted are really guilty or innocent, or whether it concerns a potato thief, a bicycle thief, a pimp, or a murderer. In August 2009 The Times confirmed parts of Ptaah's statement in an article titled "Death row organ donor scandal exposed in China".

Considering the above arguments, one may come to the conclusion that donating an organ and transplanting it from one human being to the next is not a good idea at all. But what would be the alternative, if one has an accident or an organ destroying disease and the body is to be repaired?

The answer is that more effort towards growing new organs in laboratories has to be made, so that human bodies can be repaired sufficiently without having to carry out transplantations. For example, promising progress in the field of regenerative medicine has been made in the US at the University of Pittsburgh, where medical research scientists successfully stimulated the regrowth of the fingertip of a man. The patient had lost half an inch of his index finger in an accident, and a medical research scientist gave him some powdered extracellular matrix of a pig's bladder to sprinkle onto the injured end of his finger. The claim is that within four weeks the fingertip of the patient grew back with blood vessels, skin, nail and all. Other scientists have begun to use patients' own stem cells to re-grow body parts, for example, bladders and blood vessels.

This shows that a much better alternative to organ transplantation is not far away, and that we can begin to turn away from organ donations.

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