# Humanity is subject to a deadly cosmic impact – is nonhuman intelligent intervention also possible?

## Nikolay Takuchev

Takuchev N. Humanity is subject to a deadly cosmic impact – is nonhuman intelligent intervention also possible? J Mod Appl Phys. 2023; 6(3):1-11.

# ABSTRACT

In the present work, a dangerous phenomenon for mankind is described, increasing the mortality from the most deadly disease on the planet - ischemic heart disease. In the joint analysis of data from satellites in orbit around the Earth and from the health statistics of several countries, it became clear that, by some mechanism, flows of positively charged particles with high energy entering the Earth's orbit increase mortality from ischemic heart disease. The increase is by an average of 5% to 15% in a zone of maximum risk in the Northern Hemisphere, parallel to the equator and bounded by the parallels of 30° and 50° north latitude. A hypothetical mechanism based on observational evidence has been proposed, according to which this dangerous phenomenon is due to solar alpha particles of high energy sufficient to overcome the resistance of the atmosphere and reach the Earth's surface in a limited area of maximum death impact. The impact is most often short lasting - for a few minutes. In the area with maximum risk, alpha particles have a detrimental effect on the human body. The area with maximum risk is limited in area and in time by two conditions - the path of the particles through the atmosphere to the Earth's surface is as short as possible (during the local culmination of the Sun, local noon) and the direction of the incoming alpha particles coincides with the direction of the vector of geomagnetic induction at the point of maximum risk, where alpha particles are not affected by the deflecting force of the geomagnetic field. Examples are given confirming the proposed mechanism of action. In the second part of the study, attention is paid to the nature of alpha particle streams reaching the Earth's orbit. In addition to those emitted by the Sun as a

result of natural processes, there are also series of pulses lasting less than 5 minutes, with strict periodicity in the series - day or week, with the same moment of registration of the pulses and coincidence of the pulses in the series by magnitude over extended time intervals, sometimes over the lifetime of the series from months to years. The alpha particles from each pulse in the series bombard the Earth's surface always in the same place. There are many such series, differing in time of recording and period, each of which is focused on a certain region of the Earth's surface. Such are, in particular, the series of pulses affecting the territory of the USA, Europe, and Central Asia. There is statistical confirmation in the US health statistics that the series of pulses affecting the country cause an increase in the mortality of ischemic heart disease by up to 5%. The lack of free access to detailed statistics on the cases of death in the other countries affected by the phenomenon does not allow a conclusion of the impact of the series of pulses of alpha particles on the health of their inhabitants. The strange characteristics of the mentioned series of pulses of alpha particles do not exclude the hypothesis that they are artificially generated from a non-human mind. The level of technological development of human civilization does not imply the possibility for it to generate such large-scale processes as the series of pulses of alpha particles, i.e. the highly developed non-human mind that generates them has nothing to do with human civilization. The series of pulses may be navigational signals causing unwitting casualties to humanity, but they may also be a form of murderous contact with a higher civilization that we have long sought, expecting only benefits after its realization, not suspecting that we live in this nightmarish contact indefinitely.

Key Words: Ischemic heart disease; Cosmic Alfa particles; UAP; UFO; SETI

## INTRODUCTION

In a series of publications Ref, a dangerous phenomenon of cosmic origin for mankind was described – the presence of a high correlation between the flows of positively charged particles with high kinetic energy recorded from satellites in orbit around the Earth and mortality on the Earth's surface from Ischemic Heart Disease (IHD) [1-10]. The phenomenon is difficult to observe because it contributes to the increased mortality from IHD among many other, more obvious reasons – heredity, age, sex, lifestyle, and other diseases. According to statistics from the World Health Organization (WHO), IHD is at the top of the list of morbid causes of death on the planet [11]. In the International Disease Classifier (ICD, 10th revision),

Trakia University, Stara Zagora, Bulgaria

Correspondence: Nikolay Takuchev, Trakia University, Stara Zagora, Bulgaria. E-mail: nnnpppttt@gmail.com. Received:- 3 July, 2023, Manuscript No. puljmap-23-6581; Editor assigned:- 7 July, 2023, Pre-QC No. puljmap-23-6581 (PQ); Reviewed:- 19 July, 2023, QC No. puljmap-23-6581 (Q); Revised:- 21 July, 2023, Manuscript No. puljmap-23-6581 (R); Published:- 7 August 2023, DOI: 10.37532/puljmap.2023.6(3);01-11



This open-access article is distributed under the terms of the Creative Commons Attribution Non-Commercial License (CC BY-NC) (http://creativecommons.org/licenses/by-nc/4.0/), which permits reuse, distribution and reproduction of the article, provided that the original work is properly cited and the reuse is restricted to noncommercial purposes. For commercial reuse, contact reprints@pulsus.com

IHDs are classified in classes I20 – I25. According to WHO data, 8.9 million people died worldwide from IHD in pre-pandemic 2019 [12]. The morbidity and mortality of IHD are not spread evenly across the planet, according to [13] ("crude rate" morbidity and mortality are defined as the number of cases and the number of deaths from IHD per 100,000 populations). The highest mortality from IHD is in a region including Central and Eastern Europe.

The mentioned dangerous phenomenon of cosmic origin has remained undetected for a long time, despite a sufficiently long series of years of space observations and medical statistics, because it is not observed in the statistical data of all countries. It is noticeable (i.e. there is a statistically significant correlation) for several small countries in Central and Eastern Europe and the Mediterranean – in the data for Bulgaria, Malta, Austria, and Hungary, but it is also observable for Asian countries – Kyrgyzstan, South Korea and Philippines, even in Africa – Cote d'Ivoire. In the affected countries, the phenomenon leads to an increase in IHD mortality within wide limits, for example, for the USA, the increase was estimated at 5%, but in individual years in the Mediterranean countries, the increase in IHD mortality reached up to 40% [4, 10].

Countries, where IHD mortality is most strongly correlated with highenergy positively charged particle fluxes, are located in a zone parallel to the Equator with approximate limits between 30° and 50°N latitude. The described phenomenon is not observed in countries located near the North Pole. It is also not observed in the statistical data of large countries such as the USA, Russia, and China, which are also located in the mentioned area. This (at least for the USA) is due to masking of the phenomenon in the general statistics for the large country if the cause acts on a limited area smaller than the country and for a limited time – lasting much less than data averaging periods for statistical purposes [10]. This phenomenon would be expected to influence IHD mortality and in countries south of the Equator, IHD mortality statistics for them are scarce, unreliable, or absent, preventing reliable inferences about such an influence in Southern Hemisphere.

US Medical Statistics provides free access for research purposes to the world's most complete mortality information for its citizens, in particular information on each death. For some interval of years in the recent past, US mortality statistics have also collected information on an individual's date of death. This made it possible, in sync with the temporal specificity of the flows of positively charged particles with high kinetic energy recorded by the satellites, to track the rapid changes in the number of deaths in the United States.

Joint tracking of rapid processes: 1. helped build a logically coherent picture of the interaction between the above-mentioned cosmic radiation and IHD mortality on Earth, 2. forced the conclusion that the radiation affecting the health and life of people on Earth is a combination of radiation of natural origin and that with unusual characteristics for natural processes.

## MATERIAL AND METHODS

A prerequisite for this kind of study is the availability of reliable data -both on possible space impacts and mortality from IHD. More

complex is the problem of the reliability of mortality data. Their obtainment requires a combination of good medical diagnostics covering the territory of the respective country, accurate administrative reporting, adequate national statistics, and easy access to statistical data for scientific purposes.

The analysis below is based on authoritative sources of health data, such as WHO, US medical statistics from the National Center for Health Statistics (NCHS), and EUROSTAT, for which the requirements listed above are fulfilled to the greatest extent [12,14,19].

The United States is the only country in the world to provide records of all individual deaths within the country. They are a symbolic line of codes with a variety of information about the deceased. For the study, software was created to extract information about the location (state), month and day of death and the cause of death by ICD. This gives the possibility to track rapid changes (per day) in mortality from IHD and to draw conclusions about the possible dependence of mortality from IHD on short-term processes in near-Earth space.

Unfortunately, the day of death was included in individual records only in data for the years before 1993, after which it was no longer monitored. This limits the study of rapid changes in mortality to only the years up to 1992.

Satellite data on corpuscular radiation – protons and alpha particles recorded by the satellites of the two series SMS (Synchronous Meteorological Satellites) and GOES (Geostationary Operational Environmental Satellites) were obtained from an NOAA site [15].

The satellites of the SMS and GOES series fly in geostationary orbit (above the Earth's equator), at an altitude of 36,000 kilometers above the Earth's surface, make one lap in 24 hours, that is, they "hang" over a certain point on the Earth's surface and are not shade by the Earth at their circumference around it.

There is one satellite of the series over each of two meridians – over the east coast and the west coast of the United States. Data on alphaparticle and proton fluxes (unit: (number of particles).cm<sup>-2</sup>.s<sup>-1</sup>.sr<sup>-1</sup>.MeV<sup>-1</sup>) with energies of the range 3.8 MeV – 21.3 MeV were used. The

fluxes were recorded by the satellite high-energy particle detectors:

1. Energetic Particles Sensor (EPS),

2. Energetic Proton, Electron, and Alpha Detector (EPEAD), and 3. HEPAD (High Energy Protons and Alpha particles Detector). In particular, EPS and EPEAD detect alpha particles with energies from 3.8 MeV to 500 MeV, distributed in 6 channels. HEPAD detects alpha particles in two more channels with energy of 2.98 GeV and more than 3.4 GeV. The data are available averaged over a 5-minute interval, during which there are up to 25 reports of the instrument.

To track rapid changes in mortality, the number of deaths from IHD per day both for the entire US and for the individual states was extracted from the US data for mortality by software created for the purpose. The calculations were made for intervals of 7 days. The intervals were chosen to cover the days with satellite-recorded pulses of high-energy positive particles.

To the extent that the hypothetical mechanism proposed below explaining the observed phenomenon assumes that charged particles of high energy pass through the atmosphere and reach the Earth's surface, the energy required for this was calculated from databases and calculators PSTAR and ASTAR [16, 17]. Geomagnetic field data were obtained from the INTERMAGNET site [18]. Correlation analysis was used to process the data.

#### RESULTS

The described dangerous phenomenon is observed in the form of dependence between the annual average flux of radiation from positively charged particles with high kinetic energy, recorded by satellites in orbit around the Earth, and the annual mortality from IHD in the statistics of several countries from all continents in the Northern Hemisphere. The countries in whose IHD mortality statistics the phenomenon is observed are located in a zone parallel to the equator with approximate boundaries along the parallels of 30° and 50° north latitude. It is observed in the annual mortality statistics of small countries. It is not noticeable in the statistics of large countries in the same zone. It can be inferred that the impact on the Earth's surface is short-lived and over a limited area the size of a small country, but is masked in large country statistics because it does not affect the entire area of the large country at the same time. This conclusion is confirmed for the USA, for which there are data on mortality in individual states [10].

For particle energies of the order of 3.8 MeV – 21.3 MeV, the yearaveraged fluxes of protons and alpha particles are highly correlated, i.e. the studied phenomenon of lethality is noticeable in both the mean proton flux and the mean alpha particle flux data. Figures 1-3 show examples of the phenomenon in which, for the reasons set out below, an averaged stream of high-energy alpha particles is included as the incident radiation. Since the victims of the discussed phenomenon are mostly elderly people, and women in many places of the world live longer, the dependence of female IHD mortality on the mean flux of high-energy positively charged particles is more pronounced, which is why the examples are for female mortality. Mortality data are from authoritative sources such as WHO, NCHS, and EUROSTAT [12, 14, 19].



Figure 1) Between females mortality from IHD in USA, Oklahoma, Le Flore County (coordinates  $34.9^{\circ}$ N,  $94.7^{\circ}$ W, av. elevation 163m, area 4170 km<sup>2</sup>, population density  $12/km^2$ ), and the average alpha particles flux reaching Earth's orbit there is a large, statistically significant correlation



Figure 2) Between females mortality from IHD in Bulgaria, Europe (coordinates 42°44'1.98"N; 25°29'8.99"E, av. elevation 470m , area 110,994 km<sup>2</sup>, population density  $63/km^2$ ), and the average alpha particles flux reaching Earth's orbit there is a large, statistically significant correlation



Figure 3) Between females mortality from IHD in the Republic of Korea, Asia (coordinates 35.8615124 N 127.096405 E, av. elevation 282 m, area 100,363 km<sup>2</sup>, population density 507/km<sup>2</sup>), and the average alpha particles flux reaching Earth's orbit there is a large, statistically significant correlation

The data averaged over a year indicate the existence of this dangerous phenomenon, but are not sufficient to clarify its mechanism. Therefore, the short-term impact processes of positively charged particle flow on human health were investigated. The SMS and GOES series satellites have been operating in geostationary orbit, recording positively charged particles since July 1st, 1974. Figure 4 shows the monthly maxima in alpha radiation fluxes recorded by satellites up to 2019, the last prepandemic year. Over the years, the maxima appear to be clustered around the "increasing activity" phase within the 11year cycle of solar activity. During the previous few cycles, solar activity was decreasing. The maxima of the alpha particle fluxes in the last 27 years decrease in magnitude and frequency of occurrence. The highest magnitudes have the alpha radiation fluxes registered in the first years of satellite operation in 1974 -1979 (Figure 5). Unfortunately, as mentioned above, the US, the only country providing researchers with complete and accessible statistics, stopped supporting the date of death parameter in individual death data after 1992. This limits the ability to monitor the rapid response in IHD mortality due to alpha particle fluxes up to 1992. Combined, the two constraints - high-magnitude alpha fluxes only in the interval 1974 -1979 and individual death date only up to 1992 - determine the time frame for the study of the effects of rapid alpha particle exposure processes on health only up to the interval 1974 - 1979, marked in the figure with a double arrow, and only for the USA. The interval of years from July 1, 1974, to December 31, 1979, includes 2010 days;

the data is from three satellites operating in orbit at that time – SMS-01, SMS-02, and GOES-03. Data were available at 5-minute intervals for 964 days (48% of the time studied).



Figure 4) Monthly maxima in the recorded alpha particle fluxes during the interval 1974 - 2019. There are no data for the interval of years 1980 - 1983.



Figure 5) Proportion of U.S. IHD deaths relative to all deaths for study year's remains constant [14]

The alpha radiation recorded by satellites is not continuous over time but is the result of individual short-term impulses. It is natural to expect that it is during these impulses that the harmful effects linking alpha radiation to IHD mortality occur. Figure 6 shows the recorded alpha radiation fluxes in September 1978.



Figure 6) Fluxes of alpha particles with energies between 3.8 and 9.9 MeV were recorded in September 1978 by channel A1 of the EPS sensor on board the GOES-03 satellite

The alpha particle streams shown in Figure 6 are of two types:

- Alpha radiation resulting from a natural process on the solar surface, possibly a Solar Mass Ejection (SME), between September 23 and 27. It is characterized by a smooth continuous change in the magnitude of the flow over days.
- 2. Short pulses lasting less than 5 minutes. This is the main type of alpha particle fluxes for the studied interval of years. Their exact duration cannot be estimated because the available data from the sensor are averaged values within a 5-minute interval. The pulses shown in Figure 6 have the same moment of appearance - at 19:35 UTC (Universal Time Coordinated) on three consecutive Mondays, i.e. have a period of exactly one week and have almost the same flow values. Series of pulses of this kind, differing in times of occurrence and having a variety of periods, from 24 hours to a week, were present throughout the years included in the study, from 1974 to 1979. In the four following years, from 1980 to 1983, no data are available from the EPS sensors on board the satellites in orbit at the time. In the following years since 1984, the frequency of occurrence of pulse flows and their magnitude has decreased. It increased again in the mid-1990s. These kinds of pulses have the characteristics of being artificially generated, and without the additional information, the main version about the source of these pulses was that they were electronic interference generated during the joint operation of the various instruments on board the satellite or were service information generated in the course of the operation of the sensor on alpha particles, i.e. are not associated with real alpha particle streams. The data on the day of death in the records of individual deaths in the US statistics gave new information, allowing on the one hand to develop of a putative mechanism of the studied phenomenon, and on the other hand, raised questions in an unexpected direction about the source of the impulses. Below are set forth: 1. the putative mechanism mentioned, which the author believes explains the phenomenon described, and 2. data on the various series of pulses, some of which affect IHD mortality on the Earth's surface, i.e. they are a series of real pulses of alpha particles detected, not generated by the sensor, and have characteristics that cannot be explained by a natural origin of the pulses of alpha radiation.

#### 1. Hypothetical mechanism of the described phenomenon

- 1.1 The study of the factors affecting mortality from IHD for several countries showed that it increases with increasing altitude [4, 10], with which the flow of positively charged particles protons and alpha particles with high energy entering the atmosphere from space should also increase. I.e. the most likely mechanism of the studied phenomenon death from IHD on the Earth's surface in connection with positively charged particles registered in near-Earth space is a direct impact on living organisms of positively charged particles that managed to pass through the atmosphere and reach the Earth's surface.
- 1.2 Only particles whose energy is above 2.4 GeV for protons and over 6.2 GeV for alpha particles could penetrate the atmosphere to Earth's surface. These indicative kinetic energies were obtained using calculators PSTAR and ASTAR, applied with data for a homogeneous atmosphere – an atmospheric

model with constant density, temperature, and pressure decreasing with height [4, 16, 17].

Figure 7 shows the average fluxes of alpha particles and protons measured by the EPEAD and HEPAD detectors on board the GOES-13 satellite within December 2017, 3922 records. It can be seen from the figure that as the energy of the particles increases, their flow decreases. For protons the flux decrease is monotonic and for energies above 0.7 GEV the proton flux is negligible, i.e. for energy on the order of 2.4 GeV, which would allow protons to reach the Earth's surface, their flux is practically zero. Another is the behavior of the alpha particle stream. After its initial decrease, for energies above 3.4 GeV the alpha particle flux increases again, reaching values exceeding those characteristic of small energies. A stream of alpha particles with energies above 3.4 GeV probably also contains those with energies of the order of 6.2 GeV, capable of penetrating the Earth's atmosphere and reaching the Earth's surface. Since the detection of alpha particles with energies of the order of 6.2 GeV goes beyond the design parameters of the detectors of the GOES satellites, the existence of streams of alpha particles with such high energy remains hypothetical.

This analysis follows the conclusion that the hypothetical positively charged particles, which, entering the human body, are capable of causing death from IHD, are alpha particles. For these reasons, only alpha particle fluxes are included in the examples above, and proton fluxes are excluded from consideration below as a potential risk for death from IHD.



Figure 7) Averaged data for December 2017 from the GOES-13 satellite shows that alpha particles are the only positively charged particles that have energies above a few GeV, allowing them to penetrate the Earth's surface.

1.3 Streams of high-energy alpha particles affecting the physiology of humans on the surface of planet Earth and causing death from IHD are emitted by processes on the Sun. Evidence in favor of this claim is the increasing number of deaths from IHD simultaneously with the increased flux of alpha particles from SME (a phenomenon on the solar surface that could be observed with other astronomical means) directed to Earth. This does not exclude other, significantly shorter-lived solar phenomena from emitting fast alpha particles – such could be, for example, solar flares, coronal holes, or another phenomenon on the Sun. The Alpha Magnetic Spectrometer (AMS-02) on the International Space Station measures cosmic rays, excluding those of solar origin (when shielded from the Sun by the station& solar

panels). In particular, it measures the flow of 3He and 4He (alpha particles) in cosmic rays. The measurements show increasing annual flux of alpha particles in cosmic rays for the interval of years from 2011 to 2017, while the flux of solar alpha particles for the same interval of years is decreasing (Figures 1 - 4) [20]. Indirect evidence for the Sun as a source of high-energy alpha particles is that this assumption convincingly explains the downstream processes that ultimately lead to death from IHD.

Streams of high-energy alpha particles have nothing to do with the solar wind, whose particles are constantly emitted in all directions and move tens of times slower.

It is assumed that alpha particles with very high energy – several GeV – reach the Earth's orbit. They remain not registered by the satellites because their energy exceeds the energy range for which their sensors are designed. Undetected high-energy alpha particles likely arise as a result of an explosive process on the Sun simultaneously or around the time of occurrence of the alpha particles detected by the satellite sensor. An alpha particle energy of the order of a few GeV means that it is moving at a speed close to the speed of light. For example, one can calculate that an alpha particle with a rest mass of 6.64465723.10<sup>27</sup> kg, with an energy of 7 GeV (1.12152411.10-<sup>9</sup> J) moves at a speed of 281000 km/s and travels the distance from the Sun to the Earth (149.6.10<sup>6</sup> km) in 8.87 min.

That is, the alpha particles capable of passing through the Earth's atmosphere are so fast that they arrive at the observation point on the Earth's surface directly from the center of the Sun's disk, minutes after being emitted from the Sun's surface.

Entering the human body, these particles are capable of causing massive ionization, damaging biological tissue, and even nuclear reactions, causing the appearance of a beam of many other particles that also damage tissue through ionization. Probably the most sensitive to such damage is the circulatory system, in which, as a result of ionization, clots can form, carried by the bloodstream to vital organs. There, the clots can cause blockage of a vital blood vessel. Elderly people with already damaged and narrowed blood vessels are especially at risk.

1.4 During the year, the solar culmination (the angle of maximum elevation of the Sun above the horizon during local noon at the point of observation), which is different for different geographical latitudes, changes its magnitude in time as well. For the Northern Hemisphere from a minimum value on December 21 (early winter) reaches a maximum value on June 21 (early summer), then decreases back. When for the observation point from the Earth's surface the Sun is at its culmination, the invading particles from the Sun move through the thinnest part of the atmosphere, i.e. the probability of penetration to the Earth's surface is greatest. The alpha particles that the detectors on the satellites register do not have the necessary energy to pass through the atmosphere and reach the Earth's surface. It can be calculated that alpha particles detected by the satellite with energy in the range of 5 -10 MeV reach the Earth's orbit about two hours later than the hypothetical fast particles in the example above. Registered particles cannot penetrate the atmosphere, i.e. they are only an indicator, delayed by two hours, of the hypothetical very highenergy particles that reach the Earth's surface (if both the

hypothetical and the indicator alpha particles are emitted simultaneously in a common blast process of the Sun). This means that the meridian with the solar culmination at the time of registration of the indicator radiation by the satellite is 30° west of the meridian at which the hypothetical alpha radiation reached the Earth's surface two hours earlier (the Earth rotates at an angular velocity of 15°/hour). That is, the damage to humans from the hypothetical alpha radiation would have occurred 2 hours before the detection of the indicator radiation by the satellite and the center of the deadly spot would have been 30° east of the meridian of registration.

1.5 Both indicator alpha particles and hypothetical fast alpha particles with energies of the order of GeV irradiate the entire sunlit part of the Earth's atmosphere. Indicator alpha particles do not reach the Earth's surface. Hypothetical fast alpha particles can penetrate to the Earth's surface only in a limited region where favorable penetration conditions are combined, the first of which was noted above - the layer of atmosphere for the particles to overcome is thinnest during the solar culmination (local noon). The most permeable for hypothetical fast particles is the atmosphere above the point on the Earth's surface, for which during the solar culmination there is a coincidence between two directions - of the geomagnetic induction vector at the point and of the invading alphaparticles. Alpha particles are then unaffected by the deflecting force of the geomagnetic field and are most likely to penetrate the atmosphere to the Earth's surface, creating a deadly spot around the "point of impact" where these two directions coincide. The geomagnetic induction vector (geomagnetic vector) for a given point on the Earth's surface has a constant direction relative to the Earth's surface at the point. For the Northern Hemisphere, the geomagnetic vector points down to the point and northward and lies in the plane of its meridian (if the slight misalignment between the geographic North and South magnetic poles is ignored).

The direction of the geomagnetic vector is characterized by the angle (inclination) between the geomagnetic vector and the horizontal surface at the observation point. The further north the observation point is located on the Earth's surface, the greater the inclination of the geomagnetic vector at the point. Along the apparent path of the Sun to the north and then to the south during the year, depending on the latitude of the point of observation, the culmination of the Sun aligns with the inclination of the geomagnetic vector twice, once, or never. Calculations show that for the Northern Hemisphere, the highest latitude for which a coincidence between the solar culmination and the inclination of the geomagnetic vector is possible is 48°N (about June 21st, this explains the lack of correlation between IHD mortality and the flux of alpha particles for the Nordic countries, whose latitudes are above 48°N), and the smallest – 28°N (about December 21st) [4].

Due to the energy losses that alpha particles suffer during their interaction with the particles of the Earth's atmosphere, the magnitude of the flow of alpha particles decreases with the increase of the length of their path through the Earth's atmosphere to a given point on the Earth's surface. The flow of the hypothetical alpha particles to the Earth's surface is weakest around December 21st when their path through the atmosphere is least inclined and therefore longest. It can be summarized that in the zone  $28^{\circ}N$  –  $48^{\circ}N$ , there are points on the Earth's surface, where twice a year at noon, conditions are created for coincidence in the directions between the geomagnetic vector and the invading solar alpha particles, if any occur at this time.

These conditions probably allow a part of the solar alpha particles with high energy to reach the Earth's surface and affect living organisms. Outside the said zone, these conditions disappear. These two geographical parallels 28°N and 48°N delineate the northern and southern borders of Central and Eastern Europe and the Mediterranean where, as stated above, the morbidity and mortality rate of IHD is highest. The increased risk of an IHD incident outdoors around local noon is a further argument for the healthfulness of the indoor midday break ('siesta') practiced in Mediterranean countries.

- 1.6 The point of impact and the deadly spot around it are unobservable. "Registration point" below is the point on the Earth's surface for which the culmination of the Sun coincides with the inclination of the geomagnetic vector at the time of registration of the alpha particle flux from the satellite detector. The detector registers the time continuously, so this moment is known. That is, the registration point can be determined, and tentatively it could serve to determine the location of the impact point and the deadly spot around it, since, as mentioned above, the impact point is about 30° east of the registration point (the moment of impact is about two hours before the moment of registration). To determine the geographic coordinates of the registration point, the hour and minutes of registration in UTC (Universal Time Coordinated) were converted to longitude, and the date to latitude [4, 10]
- 1.7 The moments of invasion of alpha particles are unpredictable, but the dates of the maximum risk from them (the dates of coincidence of the two directions of the movement of the alpha particles and the direction of the geomagnetic vector) can be calculated according to the proposed hypothetical mechanism from the latitude data of the observation point in the zone 28°N 48°N [4, 10].

#### 2 Strange pulses of alpha radiation

The alpha pulses recorded in September 1978 by the GOES-03 satellite, shown in Figure 6, have registration points falling within the United States. The coordinates of the registration points are calculated by the date, time, and minutes of the moment of their registration by the satellite. If alpha radiation associated with these pulses had reached the Earth's surface, increased IHD mortality would be expected in the US territory on pulse days. To examine how pulse timings were associated with the number of deaths in the US territory, seven-day intervals centered on the day of pulse registration were examined. For each of the seven days in the interval, the number of deaths per day from IHD in the US as a whole and separately for each of the nation's constituent states was calculated. The correlation coefficient between alpha radiation fluxes and the number of deaths during the seven-day interval was calculated.

No increased US mortality was found for the pulses in Figure 6. This may be due to a lack of association between recorded pulses and US IHD mortality, for example, due to spurious pulses being generated by the detector which no alpha radiation is associated with.

As it turned out later, the pulses of the example were recorded weak alpha radiation – of small magnitude, and as a result with negligible influence on the mortality from IHD in the territory of the USA. This example shows that there should be proportionality between the indicator alpha radiation recorded by the satellite and the hypothetical alpha radiation reaching the Earth's surface – when the indicator radiation is weak, the observed effect on IHD mortality due to the proportionally weak hypothetical alpha radiation is also weak. And vice versa, with strong indicator radiation a strong effect on mortality should also be expected. The observation has shown that a statistically demonstrable increase in mortality is observed when indicator fluxes are above 1000 particles.cm<sup>2</sup>.s<sup>4</sup>.sr<sup>4</sup>.MeV<sup>4</sup>.

Confirmation of this logic of reasoning is Figure 8, where the indicator pulses of alpha radiation registered in the following month – October 1978 are shown. It can be seen that the magnitude of the fluxes of indicator alpha radiation is a hundred times greater than the pulses shown in Figure 6. Again the observed fact that 5 of the pulses obeyed a strict periodicity – with the same moment of occurrence – at 19:35 UTC (one at 19:40 UTC), Monday, for exactly 7 days, is surprising. In nature, natural processes with such a cycle are not observed (unlike the Bible, in which this is God's working week). Three of the pulses have the same flux value: 2566.8 particles.cm<sup>2</sup>.s<sup>′</sup>

pulses depends on the hour and minutes of the registration of the alpha radiation pulse, and for the same registration time 19:35 UTC falls in the region of the western USA, on the same meridian with coordinates  $-114^{\circ}$ W.

According to the mechanism of the phenomenon described above, if real streams of alpha particles are associated with the pulses, then their point of impact is about 30° east (two hours earlier than the time of registration), on the territory of the eastern United States, where an increased number of deaths from IHD should be expected at that time. Fully consistent with the above-described hypothetical mechanism of the phenomenon, for the pulses in Figure 8, distinct correlations are observed between the alpha particle fluxes and the number of suspected cases of IHD in the US territory, for the sevenday intervals around the dates of the pulses.



Figure 8) Streams of alpha particles with energies between 9.9 and 21.3 MeV were recorded in October 1978 by channel A2 of the EPS sensor on board the GOES-03 satellite. Between the pulses marked in red, there is a strange periodicity of exactly one week and they are of the same magnitude

Examples of two such dependencies concerning the pulses of Figure 8 are shown in Figures 9 and 10.



Figure 9) Between the fluxes of alpha particles with energies between 9.9 and 21.3 MeV for the seven-day interval September 29–October 5, 1978, recorded by channel A2 of the EPS sensor on board the GOES03 satellite and the number of IHD deaths in the United States for the same interval there is a high, statistically significant correlation.



Figure 10) Between the fluxes of alpha particles with energies between 9.9 and 21.3 MeV for the seven-day interval October 27 – November 2 1978 recorded by channel A2 of the EPS sensor on board the GOES.03 satellite and the number of IHD deaths in North Carolina for the same interval has a high, statistically significant correlation.

These dependencies are proof that the recorded pulses are real streams of alpha particles, with a strange periodicity (a week). The time of registration 19:35 UTC shows that the indicator radiation falls over the western regions of the USA and its corresponding hypothetical high-energy radiation capable of causing death by IHD falls over the densely populated eastern parts of the USA. For the seven-day interval around October 2, 1978, for which there was a high correlation between alpha radiation pulses and the number of IHD deaths for the US as a whole, correlations were also obtained between alpha radiation fluxes and the number of death cases for each of the states separately. The numerical values of the correlations above 0.4 combined with the coordinates of the centers of the respective states are shown in Figure 11. From the figure, it can be seen that, in full accordance with the predictions of the aboveproposed mechanism of the described phenomenon, a deadly spot appeared at noon on October 2, 1978, in the eastern United States and resulted in a simultaneous increase in IHD death with a large enough number of cases to affect the national IHD death toll

statistics for October 2<sup>nd</sup> (Figure 9).

The strange periodicity of alpha particle pulses rules out their natural origin. If the alpha particle pulses are of artificial origin, the question arises as to who produces them. This would have to be a highly intelligent non-human mind since the generation of powerful streams of alpha particles recorded at 36000 km from the Earth's surface is not within the capabilities of human civilization at the modern stage of its development. Are these not the long-awaited signals of an inhuman civilization with an incomprehensible concept of contact related to the slaughter of people?

Is it possible that a cosmic phenomenon deadly to humans on Earth was deliberately caused, or is its deadly side effect of navigational or communication signals of unknown origin to mankind?



Figure 11) The point of registration of the indicator pulse of alpha radiation on October 2, 1978, is shown in the figure with a red cross. The hypothetical radiation associated with this pulse forming a death spot 30° east of the registration point is shown as a circle. The death spot covers areas with increased IHD mortality (increased correlation coefficient between radiation and IHD deaths for individual states), in full agreement with the aboveproposed mechanism of the studied phenomenon

Figure 12 shows pulses of alpha radiation recorded by a satellite at the time 19:35 UTC for the studied interval years 1974 – 1979. Initially, the period of the pulses was 24 hours, then it was changed to a week during the operational activity of the same orbit satellite – SMS-02. The magnitude of the pulse is constant for long time intervals.

Figure 13 shows only the weekly cyclicity of the recorded alpha pulses at 19:35 UTC, Monday. As mentioned above, only 48% of satellite information contains processable data. Data for the rest of the time are missing. The fact that the recorded alpha pulses with a time of registration of 19:35 UTC is on a Monday suggests that the other Mondays during the year for which satellite data are missing also have alpha particle pulses that influence IHD mortality in the USA. This can be checked if the number of deaths from IHD is calculated for each day of the year (there are no missing data in the health statistics) and the number of deaths on Monday is compared to the average number of deaths on the other days of the week. This calculation was made for 1978. The result is shown in Figure 14. The difference between the number of deaths on Mondays and the average number of deaths on other days of the week is statistically significantly different from zero (t-Test: Paired Two Sample for Means). This difference may be attributed to the influence of alpha particle pulses on the number of IHD deaths in the US. The relative share of this impact for the US is a 5% increase in IHD mortality due to the alpha

particle pulses recorded at 19:35 UTC causing death spots to appear over the US territory. The point of registration of these pulses is in the western regions of the USA, therefore the victims of the discussed phenomenon through the mentioned pulses, as predicted by the mechanism proposed above and confirmed by the example of figures 9 and 11, are the residents in the densely populated eastern regions of the USA.

Figure 13 shows the presence of long time intervals during which the magnitude of the alpha radiation pulses is constant. The combination of alpha radiation pulse periodicity of exactly one week and constant magnitude is characteristic of artificially generated pulses. As the examples above make clear, these artificial pulses kill people on Earth's surface.

Pulses of alpha radiation are almost always grouped in series, differing from each other in time of registration, period, and magnitude. The 19:35 UTC check-in series discussed above is just one of them. It has the largest number of pulse registrations and is one of two or three series whose effect on IHD mortality can be examined with data on individual death dates available only for the US. The different series of impulses for the studied interval of years are shown in Figure 15.

Figures 16-18 show the registration points for pulses with an alpha particle flux of at least 1000.cm<sup>2</sup>.s<sup>1</sup>.sr<sup>1</sup>.MeV<sup>1</sup>. In addition to the time series pulses from 19:35 UTC that influence IHD mortality along the US East Coast, the time series pulses from 21:35 UTC also have an influence. Death spots associated with its pulses cover the west coast of the USA and affect mortality there [8]. The calculation of US mortality above does not include the victims of the group of impulses, with a time of registration at 21:35 UTC.



**Figure 12**) For the survey period of years 1974 - 1979, pulses of alpha radiation with a registration time of 19:35 UTC have an invariable magnitude for large time intervals and change their periodicity from daily to weekly, within the operation of the same satellite, SMS -02.



Figure 13) Pulses of alpha radiation recorded by a satellite at 19:35 UTC after February 1977 are strictly periodic with a period of one week, for long

intervals they do not change in magnitude and do kill people on the Earth's surface



Figure 14) Between the number of deaths in the United States on Mondays in 1978 when pulses of alpha particles were recorded from the series with a time of registration at 19:35 UTC (Figure 13) and the average number of deaths on the other days of the week there is a statistically significantly different from zero difference



**Figure 15)** Series of pulses of alpha radiation recorded by a satellite in Earth orbit with the longitude of their point of registration. The most numerous are the series with a registration point over China, the European Atlantic coast, the Western regions of the USA, and the eastern Pacific



Figure 16) Points of registration of pulses of alpha particles with a flux of not less than  $1000.cm^2.s^{-1}.sr^1.MeV^1$  on the territory of central Asia. A Google Earth map was used



Figure 17) Points of registration of pulses of alpha particles with a flux not less than  $1000.cm^2.s^{-1}.sr^{1}.MeV^{-1}$  of the western coast of Europe. A Google Earth map was used



Figure 18) Points of registration of pulses of alpha particles with a flux of not less than  $1000.\text{cm}^2.\text{s}^{-1}.\text{MeV}^1$  in the western parts of the USA, as well as in the eastern Pacific. A Google Earth map was used

Figure 19 shows a plot of the impact on IHD mortality of two alpha particle pulses separated by two days – one with a point of registration in the western United States, the other with a point of registration in the Pacific Ocean near the west coast of the United States. If these are artificially created pulses of alpha particles, it is intended that the death spots associated with them cover the most densely populated areas of the country, i.e. lead to the death of the maximum number of people in the US area. This is hostile behavior by a non-human intelligent force. Nothing can be said about the influence of the other pulse series in Figure 15 since there are no available data on individual deaths and the day of death elsewhere in the world except for the USA. It can only be added that a series of pulses of alpha particles also falls on a meridian along the western coast of Europe. Their respective death spot covers Central and Eastern Europe, where IHD mortality is maximal [13].



**Figure 19)** Example of the influence of two pulses of alpha particles. One was recorded on 27 September 1975 with a point of registration 37°N – 117°W over the western US. Its corresponding death spot is located 30° east, covering the eastern United States. The other pulse had a registration point in the Pacific Ocean on September 29, 1975. Its corresponding death spot was located 30° east, covering the western United States

#### DISCUSSION

The paper examines a phenomenon dangerous to human health, representing the dependence of mortality from IHD on the Earth's surface from high-energy solar alpha radiation entering the Earth's orbit. The existence of such a phenomenon was established by joint examination of data from satellite observations and health statistics of several countries. Free access to data from the United States Health Statistics, in particular on individual deaths and date of death, allowed the analysis of the rapid processes of the effects of alpha radiation fluxes on IHD mortality at the Earth's surface. A mechanism of the phenomenon is presented, according to which the impact on the human organism is carried out directly by solar alpha particles invading the Earth's surface. They have enough high energy sufficient to overcome the losses of interaction with the particles that make up the atmosphere. Particles are most likely to reach the Earth's surface under two conditions-at local noon and in a location where there is a coincidence of two directions-of the incident alpha radiation and the geomagnetic vector at the point. In this case, the alpha particles do not experience the deflecting geomagnetic force, capable of changing the direction of their movement. The streams of alpha radiation are of two types - of natural origin with continuous change in time on the order of hours and days, and short-term pulses in less than 5 minutes that have strange characteristics - appear in the form of series with a fixed period - day or week, with the same magnitude, remaining unchanged for long time intervals, the same moment of registration of the pulse. These pulses, when of sufficient magnitude, also cause IHD deaths on the Earth's surface. The pulses follow in series directed to certain points of registration on the Earth's surface - where the solar culmination coincides with the inclination of the geomagnetic vector at the moment of registration of the pulse. Due to the same moment of registration, all points of registration are located on the same meridian, i.e. the impact of the pulses of the entire series is aimed at the same region of the Earth's surface where they cause death by IHD. The origin of pulses with similar characteristics cannot be explained by natural processes. It is more likely that these series of pulses were caused by a reasonable force, but the scale of the phenomenon - the magnitude and power of the pulses, their consistency with the daily and annual course of the Sun (i.e., it is not excluded that the Sun is also technologically manipulated), shows that such intelligent intervention is beyond the power of human civilization at the present moment of its development. Who could emit them and how he uses them remains an open question. This is not humanity.

The fact that the series of pulses are continuously directed to certain areas on the Earth's surface and have a constant magnitude for a long time allows us to make three assumptions:

1. That pulses are navigational signals, and the non-human mind which produces them is indifferent to the loss unintentionally

inflicted on mankind by them. For example, an area with frequent sightings of Unidentified Aerial Phenomena (UAP, UFO) – Uintah Basin, Utah, USA, is located close to the meridian -114°W, where the points of registration for a series with registration moment 19:35 UTC are clustered around (in western US, figure 18). These pulses have produced notable increases in IHD mortality along the eastern edge of the United States. At the northeast end of the Uintah Basin is the Skinwalker Ranch, popular for its mysterious phenomena.

- 2. The terrible possibility that pulses are an imperceptible for humanity way to deliberately cause death in the human population, which speaks eloquently of a hostile attitude to the humanity inhabiting the Earth, and
- 3. Since death from IHD predominantly affects the elderly, it is possible that the non-human mind should exercise monitoring and some "sanitary logging" in the human population.

# CONCLUSION

The phenomenon described in the present work, dangerous for humans, is observable in an area of the planet's surface where a significant part of the human population is concentrated. The source of the threat is alpha particles with high energy – of natural origin, but with a high probability and generated artificially for a reasonable mind, not related to human civilization.

thinking is slowly Human freeing itself from its anthropocentric notions. It was only 500 years ago out of 10,000 years of human civilization that the idea that the Earth was not the center of the world began to take hold. We still live with the idea that in the Cosmos accessible to us we are the only sentient species, and it will take many years of effort to find a signal from a kindred spirit somewhere in the distant Cosmos, contact with which humanity would only benefit. For decades, the SETI (Search for Extra-Terrestrial Intelligence) team has been looking for such a signal, and who knows why they think that the expected signal can only be communication, coming from distant Space and only electromagnetic.

As it became clear above, such a signal can also be a series of unmodulated pulses of alpha particles through which a sentient force "contacts" humanity, killing its members. Some bright minds of humanity like Stephen Hawking, reflecting on the "upcoming" meeting with intelligent beings in the vague future, invite caution. In a popular show, he made the analogy that a future visit by extraterrestrials to Earth would turn into a nightmare for Earthlings similar to that for Native Americans after the arrival of Columbus. Similar skepticism about a future encounter with non-human intelligence was expressed by many other thinkers, the most popular of which was H. W. Wells with his novel War of the Worlds. The data presented in this work show that such an encounter is not somewhere in the future; we unknowingly live in contact with cosmic intelligence for an unknown number of years in the past to the present, and perhaps co-use the Earth. Unfortunately, all we can conclude from the data presented is that contact with an un-human reasonable mind increases mortality from IHD.

# Humanity is subject to a deadly cosmic impact

#### REFERENCES

- 1. Takuchev N. Solar corpuscular radiation and mortality from various forms of ischemic heart disease in Bulgaria for the interval 2005-2015. AIP Pub. 2075(1): 2019
- Takuchev N. 2020 Ischemic Heart Diseases Mortality for Bulgaria Partly Depends on Solar Corpuscular Radiation? ES J Car. 1(2) 2020.
- Takuchev N. How Ischemic Heart Diseases Mortality Depends on Solar Corpuscular Radiation: A Case from Bulgaria. Cha Disea & Hea R. 8; 2021:44-55.
- Takuchev N. Does the Angel of Death Sometimes Use Solar Alpha Particles to Take Our Souls?6: 2021: 1-40.
- Nikolay Takuchev. Solar Corpuscular Fluxes of Alpha Particles and Mortality from Ischemic Heart Disease in Bulgaria. RAD SAF. IN THE MOD. WORLD .2021
- 6. Nikolay Takuchev. The Solar Alpha Particles Invading Earth and Ischemic Heart Diseases – the Worldwide Killer Number One, Connected? L J Press 22(5): 2022.
- Nikolay Takuchev. The High-Energy Positive Solar Particles Invading the Earth with Contribution to the Mortality from Ischemic Heart Diseases? SCIREA Journal of Physics. 8(2), April 2023.
- Nikolay Takuchev. Alpha particle fluxes and ischaemic heart disease mortality study for Bulgaria and Los Angeles, California, USA. J Mod Appl Phy 6(2): 2023. 1 – 10.

- Takuchev N. Solar Alpha Particles and Death from Ischemic Heart Disease. J Cur Med Res & Opi. 2023; 6(06):1616-25.
- Nikolay Takuchev. 2023. Space threat to the USA increase in mortality from ischemic heart disease due to high-energy alpha particles entering Earth's orbit, J Mod Appl Phy, 6 (3): 2023.
- 11. Most Common Causes of Death. 2020
- 12. WHO Deaths from IHD. 2019
- Khan MA, Hashim MJ, Mustafa H, et al. Global epidemiology of ischemic heart disease: results from the global burden of disease study. Cureus. 2020; 12(7).
- Centers for Diseases Control and Prevention (CDC), USA, National Center for Health Statistics (NCHS), Scientific Data Documentation, Detailed Mortality File, 1962-1992 asps. 2023.
- 15. Data from GOES satellites. Available. 2020
- 16. PSTAR : Stopping Power and Range Tables for Protons
- 17. ASTAR. Stopping Power and Range Tables for Alpha Particles
- 18. Data on the geomagnetic field. 2018
- Eurostat. International statistical classification of diseases and related health problems. 2021
- 20. Cosmic Ray Data Base (CRDB), charged cosmic-rays. 2023