

Edited Version of Original Letter:

31<sup>th</sup> October, 2020.

## NATIONAL SECURITY IMPLICATIONS: AMENDMENT OF NATIONAL HEALTH ACT 2014

### **National Security Demands Federal Government Amendment of the National Health Act 2014 to Prevent Mass Harvesting of Human Organs and Poaching of Ovarian Eggs from Nigerians**

We would like to draw your attention to the Statutes of the National Health Act 2014 (NHAct) that permit Human Organ Trafficking and Poaching of Ovarian Eggs that may lead to deaths of millions of Nigerians. We hereby warn that if the NHAct is implemented without the proposed amendments it will facilitate the operations of International Organized Criminal Cartel on Human Organ and Ovarian Egg Trafficking. On the other hand, if terminated now and the crime exposed, Nigeria would be Saved!

#### The Main Aims of the Foreign Sponsors of NHAct 2014

The first part of this project in Nigeria would provide the human organs to keep the rich Western patients alive, until they succeed with the therapeutic human organ cloning. Organ cloning using embryonic stem cells is a projected BIG business worth 30 trillion US Dollars (one-third of world economy) for the Western economies within the next 5-10 years of operation! This is the anticipated Western Economic Recovery Plan of the G7 countries to get ahead of Asia. This program is supported by most Western governments and many billionaire-investors. How does this work? To clone a tissue like heart you will need to collect the nucleus (that stores all its genetic materials) of the heart of the sick person and place it in a human ovarian egg obtained from a woman through IVF (in-vitro fertilization). The new cell is put in a tissue culture to grow into a heart, which could be transplanted to the sick person. The process of transferring the nucleus to the egg is called Somatic Cell Nuclear Transfer (SCNT). Has this worked? Yes! SCNT was applied in experiments of Dolly the Sheep derived by cloning. To perfect the SCNT process for therapeutic cloning, they will need millions of human ovarian eggs. It has been forbidden in all Western countries to collect the ovarian eggs of women for this experimentation. But the law like the British Embryology Law permits using human eggs from Africa and those of animals while banning use of human eggs from Europe and America! It has been estimated that, at least 100 million ovarian eggs poached from 10 million Nigerian women would be required annually for about 5 years. This would be obtained through in-vitro fertilization (IVF). Women have to go for the procedure if they want to get pregnant or they are donating their ovarian eggs. The IVF Clinics in Nigeria are proliferating under sponsorship of Foreign owners using Nigerians as fronts for ovarian egg harvesting! What then would get Nigerian women to go for IVF? For this purpose, they instituted a massive vaccination program funded by the 'Philanthropist' billionaire and his related 'reputed' international and national organizations. The vaccination for polio and tetanus has at different times been coupled with 'sterilizing agents' even though denied by the international agencies, facts suggest otherwise.

The billionaires bank-rolled the UN agencies for 20 years and staffed it with critical manpower working together to achieve this goal under the UN banner of deception that captivates most Nigerian officials! The billionaires own over 90% of the embryonic stem cell research companies. The 'Philanthropic' vaccine donations have laced common vaccines with infertility agent that reduces human chorionic gonadotropin (anti-HCG) to cause miscarriages. This has been done successfully with the tetanus vaccine and other common vaccines (see attached Talwar GP et al. A vaccine that prevents pregnancy in women (human chorionic gonadotropin/birth control vaccine) Proc. Natl. Acad. Sci. USA. 1994;91:8532-8536). The ovarian eggs could be poached through IVF after administering a set of hormonal injections. Faced with the challenge of bareness, Nigerian women will go for IVF, where 12 ovarian eggs could be poached and maximum of 2 used for trials. The rest are sold by IVF centres to Western laboratories working on embryonic stem cell research. According to the European Union report, Nigeria is the top country for export of human ovarian eggs (see attached Jana Tutkova, 'Human Egg

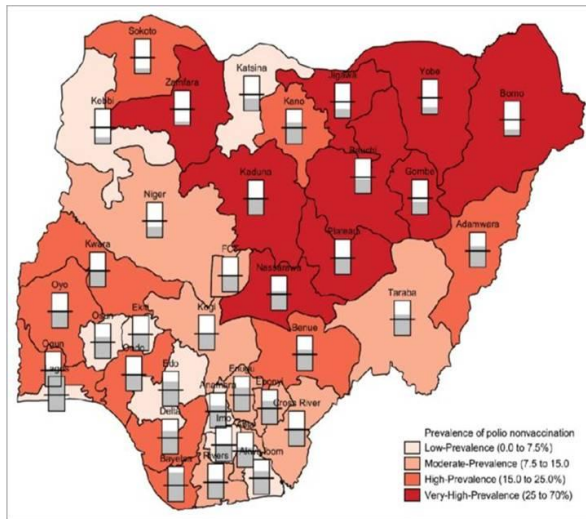
Trafficking in Europe', European Policy Officer, Core 30<sup>th</sup> March, 2006). About ten million Nigerian women could die in 2-3 years from the complications called Ovarian Hyperstimulation Syndrome (liver failure, kidney failure, cancers, infections, etc). These criminal actions must be protected by an enabling system law in Nigeria, hence the NHAct 2014, was designed to do just that in disguise. The so-called good statutes were framed as window-dressing to cover the main criminal statutes.

The second arm of the plan is to capture the food security of Nigeria by supporting the so-called Boko Haram insurgency to destroy the natural food producing areas of the Northeast Nigeria by displacing farmers to lose their natural seeds, only to allow them back, to be given genetically modified (GMO) seeds by 'international' donor-agencies and their NGOs, that would make the entire country dependent on foreign biotechnology companies for all GMO food crops. Since GMO seeds do not replicate or do so very poorly, every planting season Nigerian farmers mainly women would be asked to collect GMO seeds on the basis of allowing poaching of their ovarian eggs for food (GMO seeds), that is Food for Egg program. To cause mass infertility, an infertility gene called Epicyte Gene (see attached report in Guardian (London) 2001) [ <https://www.theguardian.com/global-development/poverty-matters/2013/jun/24/gm-crops-african-farmers>] has been inserted in the GMO seeds and so-called Hybrid Corn, Cowpeas or Beans, Yellow Rice that would be given to children in the 'internationally' supported Home-Grown School Feeding program across Africa. Bribes in billions of US dollars were paid to all sectors of Nigerian government, private organizations and press in an environment of corruption and total ignorance of the devastating consequences this would bring to the People of Nigeria. The government of President Buhari has the historic mission to prevent this looming disaster. We pray that God give us the firmness, good health and Will to be successful!

The GMO Seeds spread and Not Religion is Cause of Insecurity in Nigeria

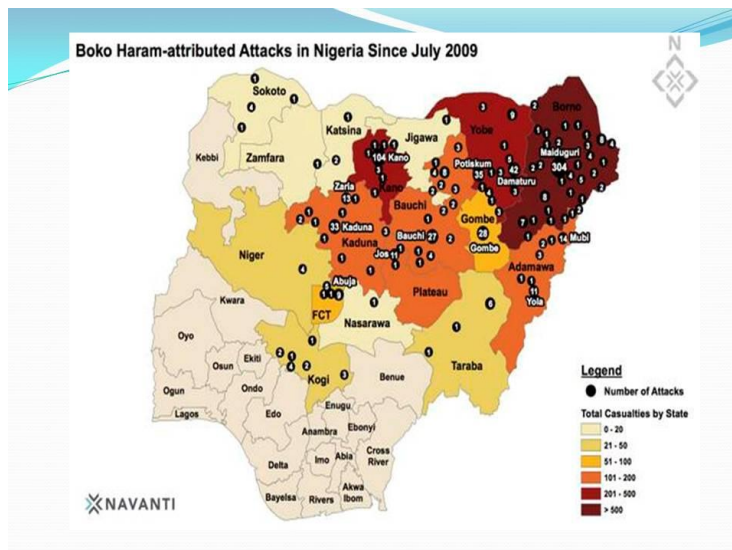
- According to the US Council on Foreign Relations between 2015-2018, 37500 people were killed by Boko Haram, of which 32000 were Muslims and 5500 were Christians. Most of dead both Christians and Muslims were Natural Seed Growers in their communities!
- Boko Haram War is mainly in the Northeast Food Basket of Nigeria.
- Does this look like attacks by Islamic Extremist?
- Why would Islamic Extremist attack Muslims?
- Why would Boko Haram attack Seed Growers?
- Why would the International Community provide GM seeds to IDPs deceptively called "improved seeds"?

VACCINATION WITH POLIO VACCINE USED AS COVER FOR SURVEILLANCE OF RURAL NIGERIA ESPECIALLY IN THE NORTH EAST & NORTH CENTRAL



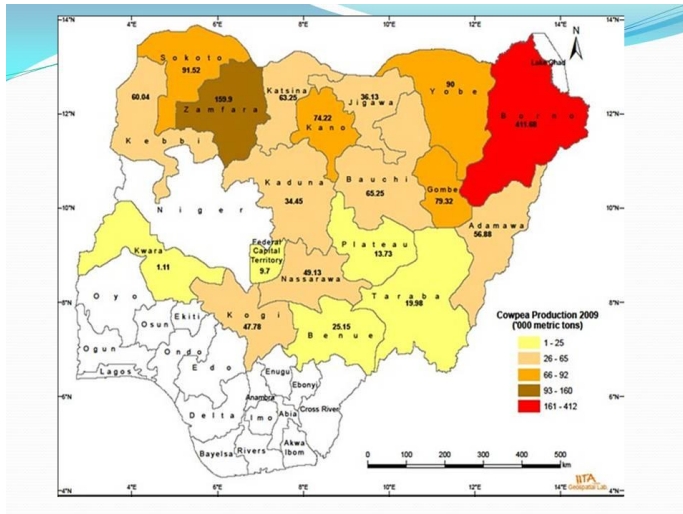
**Figure 1.** Polio vaccination areas used as cover for surveillance of rural Nigeria and move fighters and arms in remote areas of Northeast and Northcentral as polio vaccinators.

They used the Polio vaccination groups intermixed with Boko Haram Fighters to penetrate all rural communities in the Northeast and NorthCentral. They now initiated Boko Haram Attacks in these areas.



**Figure 2.** The areas of the Northeast and Northcentral penetrated by Boko Haram fighters disguised as polio vaccinators were attacked to eliminate natural seed growers and burn fields of natural seeds.

Their aim is to clear the fields of cowpeas and all natural crops to replace the crops with 'Improved Seeds' which are genetically modified from MONSANTO. The cowpeas production areas were attacked to replace the natural seeds with genetically modified cowpeas (GM-cowpeas) approved by the Nigerian - National Biosafety Management Agency (NBMA) a proxy Monsanto funded agency of the Federal Government.



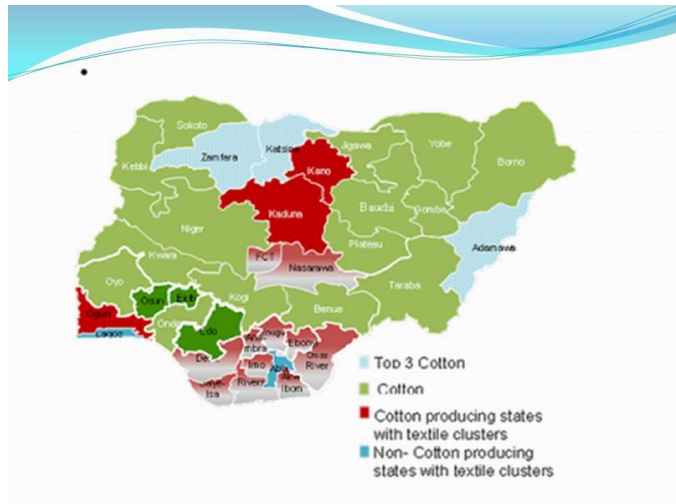
**Figure 3.** The approval of GMO Cowpeas by NMBA accelerated Boko Haram attacks to eliminate natural seed growers in the Northeast and Northcentral. The fields were replaced with GMO seeds called ‘improved seeds’ distributed by so-called ‘International Donors’ who are operatives to the Billionaire Sponsors of Boko Haram.

At each location all the local seed farmers are killed and their farms burnt. An example is shown below in the aftermath of a Boko Haram attack that devastated in Rann town, Kala/Balge LGA Borno state north-east Nigeria, displacing more than 10,000 people of natural seed growing communities. The local farmers were driven into Internally Displaced People (IDP) camps and when their farms are completely burnt and natural seed stores eliminated they could be resettled with GMO ‘Improved Seeds’ from International Donors through a network of local NGOs sponsored by the Billionaire Foundation.



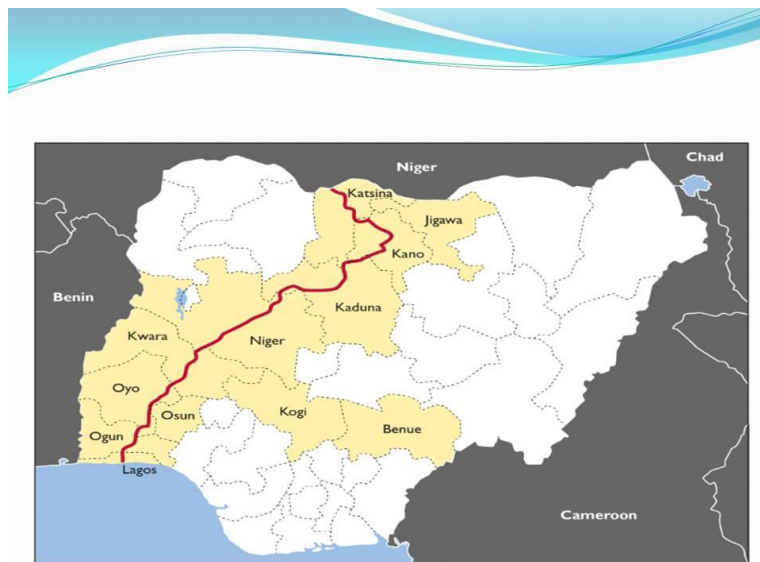
**Figure 4.** New satellite images analyzed by Amnesty International show the horrific aftermath of a Boko Haram attack that devastated in Rann town, Kala/Balge LGA Borno state north-east Nigeria, displacing more than 10,000 people of natural seed growing communities.

The NBMA have also approved GMO Cotton such that the Billionaire Sponsors of Boko Haram want to eradicate natural Cotton and replace them with Monsanto GMO Cotton. The map of the cotton producing states below shows that access could be reached by funding special projects along the Lakaji Corridor through a pseudo-foundation grant loan given to proxies of Boko Haram fighters along the Lakaji Corridor. The attacks along this corridor to burn farms were supplemented with attacks by so-called Bandits a rebranding of Boko Haram fighters to disguise their origins and funding.



**Figure 5.** The major cotton producing states Ogun – Kaduna – Kano are accessed through the LAKAJI corridor.

Bandits are funded by International and National Billionaire Foundations to locate their businesses along the Lakaji corridor and form clusters of mercenaries that attack and burn the natural cotton fields creating a shortfall in local cotton supply for textile and enabling importation and distribution of the MONSANTO GMO Cotton Seeds already approved by the NBMA.



**Figure 6.** The LAKAJI corridor from Lagos – Kano – Jigawa provides access to all the Cotton producing states. The International Donors sponsored by Billionaire Foundation are active along the

corridor to provide proxies of Boko Haram aid that would facilitate the Boko Haram and bandit operations.

#### AMENDMENTS TO THE SPECIFIC SECTIONS OF THE NATIONAL HEALTH ACT 2014 (NHAct 2014)

We will discuss the contentious sections of the NHAct (Sections 13, 20, 43, 45, 48, 51, 53, 58, and definition of gametes) and pitfalls which are obvious to anyone applying common sense.

##### A. POACHING OF HUMAN ORGANS OF NIGERIANS:

1. The Act in Section 51 states that:

(1) A person shall not remove tissue from a living person for transplantation in another living person or carry out the transplantation of such tissue except:-

(a) in a hospital authorised for that purpose; and

(b) on the written authority of:

(i) the medical practitioner in charge of clinical services in that hospital or any other medical practitioner authorised by him or her; or

(ii) in the case where there is no medical practitioner in charge of the clinical services at that hospital a medical practitioner authorised thereto by the person in charge of the hospital.

(2) The medical practitioner stated in subsection (1)(b) shall not be the lead participant in a transplant for which he has granted authorisation under that subsection.

(3) For the purpose of transplantation, there shall be an independent tissue transplantation Committee within any health establishment that engages in the act and practice of transplantation as prescribed.

##### ACMPN REBUTTAL of Section 51:

Section 51 focuses on transplantation which has no relevance to health system regulation. The entire sections on transplantation are irrelevant to health framework law. Laws on transplantation are usually addressed separately. These provisions were inserted into the NHAct 2014 because of the interest of foreign sponsors of this law in human organ and ovarian egg trafficking. The main subject of any transplantation surgery is the DONOR (that provides the organ) and the patient who is the RECIPIENT (that receives the organ). This section should first acknowledge the rights and obligations of the DONOR and the RECIPIENT! Rather, the drafters chose to acknowledge the rights of the health administrator who has no 'locus' in the matter, that means he/she has nothing at stake. It is a fundamental legal principle: *nemo dat quod non habet* - 'you cannot give, what you do not have', in other words, the doctor cannot authorize transplantation of another person's organ. For the first time, this universally recognized legal principle was overturned in the NHAct 2014. The doctor/administrator was given the power over the right to life of another person (the DONOR). The latter is a major violation of the Fundamental Right to Life of the DONOR and is a major breach of the Fundamental Rights Section of the 1999 Constitution of the Federal Republic of Nigeria! Section 51 is null and void and of no effect. Section 51 was worded on purpose, because the Organ Trafficking Cartel who own the hospitals (260 foreign owned hospitals sponsored by the Billionaire Foundation now under construction in Nigeria) licensed for transplantation would be the same people who would decide that a Nigerian's organ be poached without even asking him/her. The NHAct 2014 permits their doctors to collect the organs without consent of the owner. All stakeholders present at the National Health Bill (NHBill) public hearings demanded that Section 51(b) clearly state "on the written informed consent of the patient (DONOR)". Any administrative instructions by the management of the hospital on transplantation are only subject to the patient's informed written consent. The ACMPN was at the public hearing to present the memo arguing against these contentious statutes of the NHAct 2014. All speakers rejected the argument raised by the Senate Committee on Health that, Section 48 provided for 'informed consent'. To put the opposition on record, the Senate Committee called for a voice vote, and it was overwhelmingly accepted that this amendment be inserted in Section 51. Section 51 as presently stated is a gross violation of the Helsinki Declaration on human subject written informed consent for medical procedures and research. It is a gross violation of Article 3 of the UN Universal Declaration on Human Rights, as well as a violation of the Fundamental Right to Life in

Article 33 of the 1999 Constitution of the Federal Republic of Nigeria. Violations of the Helsinki Declaration and UN Universal Declaration on Human Rights are very serious and could attract sanctions against Nigeria including suspension of its privileges as a UN member state! Nigeria's human rights record could be downgraded.

## B. NHACT 2014 PROMOTES HUMAN ORGAN SALES

### Argument by Proponents:

The proponents of the law say that, in Section 48 there is a provision for DONOR consent.

Let us examine section 48:

- (1) Subject to the provision of section 53, a person shall not remove tissue, blood or blood product from the body of another living person for any purpose except;
  - (a) with the informed consent of the person from whom the tissue, blood or blood product is removed granted in prescribed manner;
  - (b) that the consent clause may be waived for medical investigations and treatment in emergency cases; and
  - (c) in accordance with prescribed protocols by the appropriate authority.
- (2) A person shall not remove tissue which is not replaceable by natural processes from a person younger than eighteen years.
- (3) A tissue, blood or a blood product shall not be removed from the body of another living persons for purpose of merchandise, sale, or commercial purposes.
- (4) A person who contravenes the provisions of this section or fails to comply therewith is guilty of an offence and liable on conviction as follows:
  - (a) in the case of tissue, a fine of N1,000,000 or imprisonment of not less than two years or both; and
  - (b) in the case of blood or blood products, a fine of N100,000 or imprisonment for a term not exceeding one year or both.

### ACMPN REBUTTAL of SECTION 48:

First, the law makes reference to Section 53.

It is an Offence for a person:-

- 1(a) who has donated tissue, blood or a blood product to receive any form of financial or other reward for such donation, except for the reimbursement of reasonable costs incurred by him or her to provide such donation;
  - (b) to sell or trade in tissue blood, blood products except for reasonable payments made in appropriate health establishment for the procurement of tissues, blood or blood products;
- (2) Any person found guilty of an offence under subsection (1) is liable on conviction to a fine of N100,000 (one hundred thousand naira) or to imprisonment for a period not exceeding one year or to both fine and imprisonment.

### REBUTTAL of Section 53:-

Section 53 (b) states that, it is legal to ask for 'reasonable payments'. So the reader should consider what is 'reasonable payment' for donating one of his/her kidneys. Could this cost be N10,000 or N10,000,000. The answer to this question reveals that, the preferred option of what many people would consider reasonable for risking his/her life to donate a kidney will be N10 million rather than N10,000. This is what clearly points to the deceptive language that was used in the NHAct 2014 to legalize human organ trafficking for money. This point was raised by the ACMPN and other stakeholders in memos and presentations at the public hearing on the NHBill 2014. It was well appreciated by the Nigerians present and the legislators promised to amend this section but never did. Secondly, while it seems that it is illegal for a person to sell organs under Section 53a, it is clearly legal for the health establishment to buy organs under Section 53b. This was inserted to exonerate the hospitals of the Cartel from any legal liabilities in Nigeria.

### C. ORGANS OF NIGERIANS WILL BE COLLECTED WITHOUT CONSENT IN SO-CALLED EMERGENCIES.

Section 48 (b) waives the right to Consent in Emergency. What is emergency?

Oxford Dictionary: A serious unexpected, and often dangerous situation requiring immediate action.  
Wikipedia: An emergency is a situation that poses an immediate risk to health, life, property, or environment.

By the definition of ‘emergency’ in medicine most health conditions may at some point in development qualify as an emergency that requires immediate intervention. Even severe headache can present an emergency! What the NHAct 2014 states is that, in all these situations regarded as ‘emergency’, the Informed Consent of the Patient may be waived for investigations and treatment. The reader should understand that, the two major functions of the hospital are investigations and treatment. In other words, for all what the hospital wants to do including surgery particularly TRANSPLANTATION, there is no legal requirement to ask the patient, what should be done to him or her!

Does ‘emergency’ mean that the patient is mentally incompetent to give consent for a medical procedure as serious as surgery for transplantation?

Of course not! This is the work of the International Human Organ Trafficking Cartel! This will never be acceptable in the history of humanity. The Nuremberg trials were instituted against German Nazi doctors who experimented on Jews without written informed consent. Here in Nigeria, we now have the NHAct 2014 which mandates an even more barbaric act against Nigerians. Is it not surprising that some professional leaders would support the NHAct 2014? No! They do that because they have been well bribed in an act of treasonable betrayal of their Motherland. They have pushed the Nigerian Government to offer her entire population to be slaughtered for their organs by a Satanic Cartel because of MONEY from the Billionaire Foundation who claims to have paid \$6.2 billion US Dollars! This is a source of National Humiliation and has made government to lose its legitimacy as a protector of the people before God and the people!

The arguments made by proponents that, it was done because of people with ‘lack of education’ is complete nonsense. The person who is not educated (probably because he/she cannot speak English) could understand and reply to you in his/her own language. It is forbidden in medical practice to Waive the Right to Consent under any circumstance for living or even dead persons where consent is transferred to next-of kin as entrenched in the Geneva Declaration. Even when a living patient is unconscious or unable to make decisions that Right of Consent is temporarily transferred to his next-of-kin or guardian or parents in the case of a child, but is NEVER WAIVED. The Supreme Court of the Federal Republic of Nigeria has reaffirmed this important principle in landmark decision on medical malpractice even when the life of the patient was at stake.

Note that Section 48 (3) forbids selling and buying of human organs. This provision is deceptive, because to pay money to the person whose organ was collected is illegal except for the so-called ‘reasonable costs’ but for the hospital to sell the organ to another person may not be within the scope of this law in Nigeria, because the commercial transaction could take place on the Internet hence not under any territorial jurisdiction.

### D. NIGERIANS GET FREE EMERGENCY TREATMENT BUT FORFEIT THEIR ORGANS FOR TRANSPLANTATION

In the NHAct 2014, human organs are poached from millions of Nigerians by offering deceptive FREE Emergency Treatment in Section 20, at the cost of forfeiting their organs:

Section 20 (1) A health care provider, health worker or health establishment shall not refuse a person emergency medical treatment for any reason whatsoever.

All medical conditions could be considered an emergency under this law because there is no definition of what is an 'emergency'. This would mean that the hospitals will admit many people under a purported 'emergency' for FREE treatment that they might pay with their organs. The Medical Director decides under Sections 48 and 51, that the organ of that patient be taken for transplantation to another living person, who is the 'Organ Transplantation Tourist', who paid hundreds of thousands of US dollars to receive the heart of a young Nigerian via the Internet. All these transactions are perfectly legal under the NHAct 2014.

#### E. NIGERIA IS A NO-GO AREA FOR TOURISTS AND NO ONE IS SAFE FROM HUMAN ORGAN POACHING

The NHAct 2014 authorizes organ poaching, however, the organ must be a tissue-matched organ that may come from a poor Nigerian, rich Nigerian or any tourist. Nobody in Nigeria is SAFE including tourists and foreigners. Anyone whose organ matches that sought by the International Organ Trafficking Cartel could be killed for their organs in Nigeria. Nigeria has violated the International Human Right Convention for her citizens and other people passing through Nigeria. The Nigerian or foreign patient could have been admitted for any reason but the NHAct 2014 permits the Medical Director to authorize surgery for transplantation of the patient's organs to another person, because their tissues match!

#### F. THE INTERNATIONAL HUMAN ORGAN TRAFFICKING CARTEL ARE NOT ACCOUNTABLE UNDER NHAct 2014 FOR CRIMES OF MURDER

This decision to poach organs of Nigerians and foreigners in Nigeria would be technically legal under Section 51 of NHAct 2014. If the patient dies and his organs poached, the same Medical Director is empowered by the NHAct 2014 to decide, whether or not, to carry out an autopsy to uncover a crime committed at the hospital. The International Organ traffickers installed this provision in Section 58, to protect themselves from being prosecuted.

Section 58:

- (1) Subject to subsection (2), a post mortem examination of the deceased person may be conducted if-
  - (a) the person, while alive, gave consent thereto;
  - (b) the spouse, child, parent, guardian, brother or sister of the deceased not below the age of eighteen (18) years in the specific order mentioned, gave consent thereto; or
  - (c) such an examination is necessary for determining the cause of death.
- (2) A post mortem examination may not take place unless-
  - (a) the medical practitioner in-charge of clinical services in the hospital or authorised institution or of the mortuary in question, or any other medical practitioner authorised by such practitioner has authorised the post mortem examination in writing and in the prescribed manner; or
  - (b) In the case where there is no medical practitioner in-charge of clinical services, a medical practitioner authorized by the person in-charge of such hospital or authorised institution, has authorised the post mortem examination in writing and in the prescribed manner.

ACMPN Rebuttal on Section 58. Since there would be no Nigerian owned hospitals (see why below), even if you ask for a post-mortem, the doctors of the foreign-owned hospitals would have to authorise and possibly arrange the report to suite them. As a result, Nigerians will die in millions over time and the foreign recipients from Europe and America would go home with new organs. This was done for years in India, Nepal, Philippines, Malaysia and other East Asian countries. They hyped the news on Indian Hospitals in mainstream Western Press, but covered the devastation of millions of lives lost and incapacitated of so-called lower caste Black Indians. Their plan for Nigeria is total extermination in their NAZI-styled FINAL SOLUTION! Note that, since they paid to own all the hospitals in Nigeria. They

paid \$3.2 billion for Federal Government Hospitals in what was called Concessioning in PPP – Public Private Partnership, arranged with the last administration. The Cartel controls the information on ‘health research’, so statistical figures of improved healthcare could be well arranged and trumped up, and no questions asked. Therefore, Section 48 is null and void because it is inconsistent with the Right to Life of the Fundamental Rights under the 1999 Constitution of the Federal Republic of Nigeria.

## G. THE INTERNATIONAL CARTEL PLANS TO ELIMINATE ALL NIGERIAN HOSPITALS

The question arises, where would this organ trafficking be done? Is it done in Nigerian hospitals owned by Nigerians? Certainly not! The Nigerian hospitals, private, public, mission and Islamic would be closed down, 24 months from the date the NHBill was signed into law according to Section 13.

Section 13:

(1) Without being in possession of a Certificate of Standards, a person, entity, government or organization shall not :-

- (a) establish, construct, modify or acquire a health establishment, health agency or health technology;
- (b) increase the number of beds in, or acquire prescribed health technology at a health establishment or health agency;
- (c) provide prescribed health services; or
- (d) continue to operate a health establishment, health agency or health technology after the expiration of 24 months from the date this Bill took effect.

(2) The Certificate of Standards referred to in subsection (1) of this section may be obtained by application in prescribed manner from the appropriate body of government where the facility is located. In the case of tertiary institutions the appropriate authority shall be the National Tertiary Health Institutions Standards Committee, acting through the Federal Ministry of Health.

Definition:

“certificate of standards” means a certificate under section 13;

The Foreign Organ Trafficking Cartel has started construction of 260 modern mega-hospitals in Nigeria. The first is in Abuja where the NHAct 2014 took immediate effect. This fact was revealed in a meeting with medical professional groups (ACMPN was present) with a leading U.S. company that was contracted by an American billionaire businessman to build and equip the hospitals in Nigeria. The medical professionals present were offered the option of accepting to close down their practices in exchange for money. This proposal was refused by the Nigerian organizations present. The proposed hospitals will be built according to the International Building Code of hospitals. The Certificate of Standards for hospital buildings are based on the International Building Code of hospitals, which has stringent standards of construction that no hospital in Nigeria meets. The plumbing is with conduit, all wiring with conduit, high floor to roof height, wide corridors, wide window width, 24-hour lighting, 24-hour air conditioning, 24-hour water, specific humidity, airflow purification etc. Similar standards apply for pharmacies and medical diagnostic laboratories. These standards which are difficult to meet even in advanced countries will be even more challenging in Nigeria. But more importantly, they have very minimal effects on health outcomes despite the enormous resources required to comply. For example, the United States’ maternal mortality ratio (MMR) remains worse than that of a developing country like Chile, which is only second to Canada in the Americas [Koch E, Thorp J, Bravo M, Gatica S, Romero CX, et al. (2012) Women’s Education Level, Maternal Health Facilities, Abortion Legislation and Maternal Deaths: A Natural Experiment in Chile from 1957 to 2007. PLoS ONE 7(5): e36613. doi:10.1371/journal.pone.0036613]. Nigeria’s health indices will not improve just because we have 260

‘five star class’ hospitals for human organ trafficking. However, the NHAct 2014 requires strict compliance under Section 13, as a means for foreigners to monopolize the entire health sector.

#### H. THE HUMAN ORGAN TRAFFICKING WOULD IMPORT FOREIGN SPECIALISTS

Who are the medical personnel to carry out these practices of organ poaching in Nigeria?

Are they Nigerians?

Certainly, not! How then do they get rid of Nigerians in key positions in the new foreign owned hospitals which are part of teaching hospitals?

To achieve this goal, the Federal Ministry of Health has negotiated public-private partnership (PPP) with the foreign investors, and in some states such private concessions has been made. The present infrastructure has been completely rebuilt according to the Certificate of Standards and the Nigerian health personnel in the Health Management Boards are totally not engaged in these health establishments, which will be operated by Indians. Engaging foreign health personnel is permitted in Sections 43 and 45 of the NHAct 2014:

Section 43 (e) prescribe strategies for the recruitment and retention of health care personnel within the national health system and from anywhere outside Nigeria;

Using Section 43 (e) the so-called experts from outside Nigeria will be hired, predominantly from India, United States and other Western countries. These so-called experts would occupy positions of decision-making within the new health system in each hospital owned by foreigners. Industrial disputes, for example, refusing to pay due allowances to health professionals will be used to sack all the Nigerian professionals in key positions needed to be vacated within 14 days of the dispute in accordance with Section 45:

45. (1) Without prejudice to the right of all cadres and all groups of Health Professionals to demand for better conditions of service, health services shall be classified as Essential Service, and subject to the provisions of the relevant law.

(2) Pursuant to subsection (1) of this section, industrial disputes in the public sector of Health shall be treated seriously and shall on no account cause the total disruption of health services delivery in public institutions of health in the federation or in any part thereof.

(3) Where the disruption of health services has occurred in any sector of National Health System, the Minister shall apply all reasonable measures to ensure a return to normalcy of any such disruption within fourteen days of the occurrence thereof.

#### I. INTERNATIONAL HUMAN ORGAN TRAFFICKING CARTEL HAS PLANNED ELIMINATION OF NIGERIAN HEALTH WORKERS BY BOKO HARAM

1. In 2015, precisely on Wednesday January, 20<sup>th</sup> a popular pharmacist Cletus Ternenge Labe from Gboko in Benue State was murdered in cold blood by gun men reportedly as a team of six with four who attacked him while the others were in the red Toyota getaway car. Pharmacist Cletus Ternenge Labe was the proprietor of the La-Bet Pharmaceuticals at Bristow roundabout at Gboko town. He was tracked by an emergency phone call to his pharmacy and murdered there at his office. He hailed from the Tiv community. At first, there was rumor that this may be related to a feud between him and the Doctors Association which

accused him of treating patients beyond his competence. This was an unfounded rumor because residents testified that he merely subsidized drugs to the indigent people. Further investigations revealed that the assassination squad was part of Boko Haram gangs operational in the area who frequently exchanged gun battle with the police. However, the rumor that it was a professional feud kick started a hunt for doctors in the area who quickly all went into hiding fearing for their lives. The gangs hunted for them to kill them. It was feared that the threat to the lives of the doctors in the area could be the start of a tit-for-tat murder spray that could see the entire health workers of the region wiped out at the same time under a false made-up professional feud started by Boko Haram and their sponsors using international press TV.

2. At the same time in 2015, at the National Executive Council meeting of the Association of General and Private Medical Practitioners of Nigeria (AGPMPN), an NGO citing to be operating under a grant from the Bill and Melinda Gates Foundation requested to create a type of “yellow book for private doctors and hospitals” with private information of the doctor and their personnel including telephone numbers, addresses, photographs and even thumb prints. The NGO offered to present the private doctors with free software programs to manage their hospitals. The council rejected the offer because of the private nature of the information demanded for the so-called “yellow book for doctors”. This demand by the NGO purportedly working for a foreign international donor foundation under a grant was considered suspect and a threat to national security in the health sector. The timing of the demand from the NGO and its relation to the Boko Haram instigated events in Gboko, Benue state sounded alarm warning bells that the health sector could be under deadly threat.

### **Summary: NHAct 2014 Was Designed By Criminal Foreign Cartel to Facilitate Human Organ-Trafficking and Therapeutic Organ Cloning**

The International Organ Trafficking Cartel has two major aims for pushing for passage of the National Health Act 2014. First, to kill Nigerians for their organs for transplantation to rich Western patients arriving in Nigeria as Organ Transplantation Tourists, and/or getting the organs flown abroad to meet the needs in Western countries where there is severe shortage of organs for transplantation. This is the reason why all international aid agencies are supporting this project for the interest of their respective countries. Secondly, this is key to the cutting of healthcare costs in most advanced Western countries. Taking many people off dialysis, artificial heart valves, and intensive care life support will save billions of USD annually in all Developed Countries. However, for many Nigerians whose organs were poached for transplantation, they meet untimely death because of the NHAct 2014. It is already well known that, millions of Black Indians and other Asians died untimely in the same manner before their corrupt political leadership was uprooted for reform to take place that stopped the widespread practice but still persisting. The NHAct 2014 introduced a health reform in Nigeria that could harm or kill many Nigerians, in much the same way, as in other countries, like India, Kosovo, Philippines, Burma, Nepal and other poor East Asian countries. It took more than two decades, for most of these governments to realize the enormity of damage to their countries. They are now struggling with a very powerful Cartel, and it is difficult to completely shut down their operations. Some hospitals in India such as the Apollo Hospital, the second largest transplant organization in the World, are now under strict parliamentary investigations for human organ trafficking. It is estimated that with full operation of the National Health Act 2014, within five to ten years over 30 million Nigerians could lose their lives or be severely injured in the Organ Transplantation Tourism trade. These estimates were derived by analogy with lives lost in East Asia as a result of the work of Organ Trafficking Cartels. Only that in Nigeria, IT!°AA would be worse and difficult to uproot. They have designed a program to control the socio-political structure, economic,

agricultural produce and destroy the religious fabric of the society. The arguments made by proponents are totally flawed and deceptive. The Organ Trafficking Cartel funded by the Billionaire Foundation has no lack of propagandists that include Mainstream Media, politicians, legislators, government officials, heads of organizations and associations, professionals, international agencies and members of the civil societies, bribed with millions of U.S. dollars to push for the passage and implementation of the NHAct 2014. President Goodluck Jonathan withheld assent to the National Health Bill twice because of these concerns. The President was under intense pressure by very powerful foreign interests particularly the United States and United Kingdom. They organized and threatened President Goodluck Jonathan with impeachment using their proxy legislators in the National Assembly, to compel him to sign the NHAct 2014. After he signed the NHA 2014, the impeachment axe vaporized as fast as it came on. Considering the foreign interests involved and the use of impeachment threats, the crimes of conspiracy to kill Nigerians by proponents in the National Assembly rises to the level of treason. The Seventh National Assembly collectively committed treasonable offences and failure to pass laws for 'order and good government' in breach of Section 4 (2)(3) of the 1999 Constitution of the Federal Republic of Nigeria, when they passed the NHAct 2014 with clearly outlined defects in public hearings. The Attorney General has the power to initiate charges of treason against those who spare-headed the passage of the NHAct 2014. It is now a test of will and patriotism if the Ninth National Assembly will choose to stand in defense of the People of Nigeria!

The NHAct 2014 permits the poaching of human ovarian eggs. This was deceptively and deliberately crafted by the Cartel. For this purpose, NHA 2014 excluded gametes (ovarian eggs and sperms) is the definition of 'tissue':

See Interpretation:

“tissue” means human tissue, and includes flesh, bone, a gland, an organ, skin, bone marrow or body fluid, but excludes blood or a gamete;

To collect the ovarian eggs, a woman receives a series of hormonal injections to stimulate the ovaries. Once stimulated, the ovaries could go into over-drive or hyperstimulation causing complications called Ovarian Hyperstimulation Syndrome (kidney failure, liver failure, cancers, infertility, etc). Illegally, Nigeria is already the largest exporter of human ovarian eggs in the World! These Nigerians are killed in Western laboratories for embryonic stem cell research. More Nigerians die in human embryo trafficking slave trade, than all those that died during the slave trade more than two centuries ago. The NHAct 2014 has legitimized this evil practice. Nigerians must wake up and be informed of the dangers of what a few unpatriotic criminal elements among us in liaison with foreign powers have done to kill innocent Nigerians. The NHAct 2014 is a danger to Our National Security!

The State Governments can amend these Sections of the NHAct 2014 before domestication or leave it completely from state laws. We call on all Nigerians to rise and demand the NHAct 2014 be repealed or seriously amended in defense of our Motherland!

Yours Truly,

Electronically signed:

Academician Prince Dr Philip C. Njemanze MD (Hons)

Chairman, Global Pro-life Alliance (GPA), for the Council on National Policies; BOT member, Association of Catholic Medical Practitioners of Nigeria, Owerri, Archdiocese, for Ethics Committee.

- **Copies sent to:** HE President Muhammadu Buhari, HE Vice President Professor Yemi Osibanjo, HE Bukola Saraki, President of the Senate NASS, HE Yakubu Dogara, Speaker of the House NASS, Ministers, Bishop Conferences in Africa, Europe, Asia and America, Head of States of all UN member countries, UN Ambassadors, UN Agencies on Human Rights, African Union, Organization of American States, European Union Parliament, ASEAN, World Medical Association, Organization of Islamic Countries (OIC), ECOWAS, ILO, WTO, WHO, UNICEF, UNFPA, USAID, DFID, CIDA, International Human Rights Organizations, international press, local press, distinguished Nigerian and African socio-political leaders.

