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Home Office Reference Number: ASC/5271126

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## **Number of Trips Made Abroad due to the Intentional Lack of Medical Help in the US Leading to Asylum**

Goes through the number of countries and trips made abroad and the events that took place in each country when seeking medical help due to the malice that taking place in the US. Its more then 25 trips (to different locations in the planet) that eventually lead to asylum in the UK.

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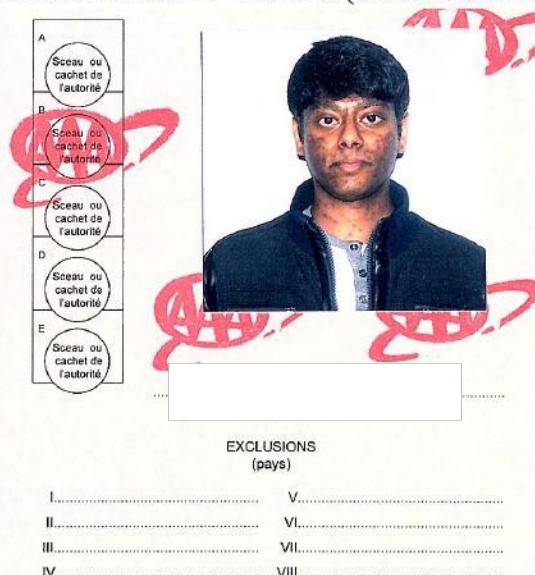
**The Number of Trips and International Effort to Gain Help Abroad due to the Intentional  
Lack of Medical Help in the US through Clear Fraud and Criminal Malice in Medical  
Settings:**

The number of trips made abroad to find basic medical help and then subsequent denial of any medical help in the US is what eventually instigated seeking asylum.

**December 2015 Mexico:**

My 5 year international battle to get help for a progressive neurodegenerative condition started in 2015. I already knew that the medical data in the US was falsified to hide the condition so I flew to Tijuana Mexico to acquire the medications for MS. I consulted with a neurologist there and did an MRI but I also got a medication for MS, prednisolone. Prednisolone is the right medication but for those who have MS it must be given in IV at a high dose and not ingested (I later get the medication in IV).

The result of not getting the medication in IV was this (severe skin rash and inflammation):



\*Ou l'empreinte du pouce.

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I had a severe reaction from the medication (though it is the correct medication, later safely given by IV approximately 28 times by competent medical professionals). The skin reaction went away and my skin healed completely within 6 months but this only happened due to what was then 8 years of medical negligence with the intent to cause harm.

The medical condition worsened again when prednisolone was discontinued (the medication still works when ingested but with a negative reaction).

I was in severe physical pain again when the medication was discontinued with occasional immobility and worsening eyesight so I flew to Bangkok, Thailand and Malaysia for medical tourism to get help in March of 2016. The doctors there noticed what was happening but they were still directed by the US to hide the underlying neurological condition (they tried to hide the condition)

### **March 2016 Malaysia:**

A short EEG was done under the guidance of Dr. Julia Merican at Prince Court Hospital to show the prevalence of seizures in the condition.

### **March 2016 Thailand:**

I went to two hospitals, Bumrungrad and Bangkok Hospitals. It was determined that I was having seizures and a gross presentation of a dementia due to the long term mistreatment of MS in the US (at that point approximately 8 years of mistreatment) but the US directed the doctors in foreign nations to falsify some basic blood profile tests (pertaining to autoimmune etiology) and the reports for seizure's (EEGs) to try and hide the condition. Despite being falsified to support the US, the doctors in Thailand (outside the hospital where the EEG was done) still recognized that I was having seizures and stated it in their reports.

They were restricted to either prescribe, give, or recommend the medications for MS by the US to further the neurological condition.

### **May 2016 India:**

An EEG was done in SIMS Hospital Chennai, India which determined that I have epileptic effects over several parts of my brain (temporal and frontal)

I flew back home and presented the data to the doctors in Massachusetts and Cleveland, Ohio but all medical evidence was denied with a refusal to treat anything, no acknowledgment with clinical evidence to show condition. The doctor was somewhat aggressive in the Ohio appointment. In the US it doesn't matter how much of a clear presentation I have of MS, there is always a complete denial with an intent to cause harm. It doesn't matter if I am completely blind or immobile, they will still deny treating the condition.

### **Germany, France, and Spain 2016:**

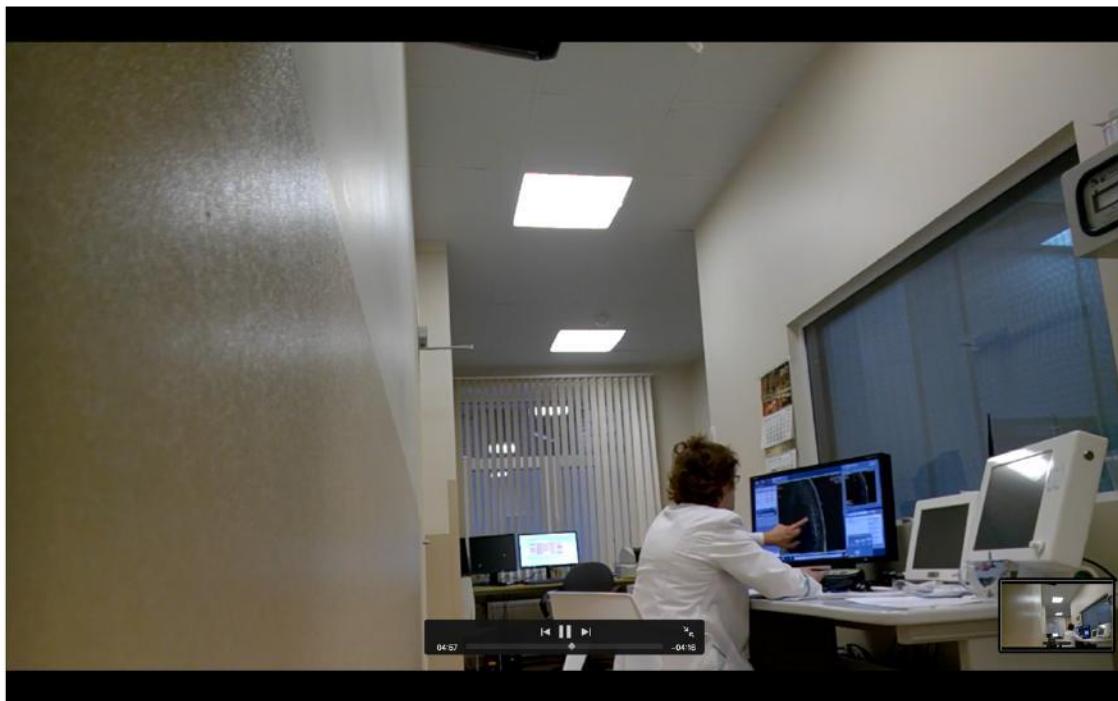
Within the end of the year I went to Germany and France, the doctors in Germany and France

were instructed to not acknowledge any part of the condition by the US. They did as instructed, in virtually every city (inclusive of Berlin, Hamburg, Nuremberg, the main hospital in Munich, Klinikum Großhadern, the MSK clinic in the outskirts of Munich and [eventually] Frankfurt). I flew to Spain and the same situation presented as in Germany and France. I flew to Istanbul where my objective was to get a visa to Russia to explore medical tourism in Russia, it would take too long to get a visa in Istanbul so I went to Latvia. I asked for help in Latvia.

## Narendra Latvia December 2016 to January 2017:

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I saw a doctor in Latvia and the doctor ordered a MRI of the brain and spinal column but the MRI radiologist tried to hide the features on MS in brain and spine. I recorded the attempt at hiding medical data which is useful to prove that the US not only tries to falsify medical data domestically in the US but directs attempts at medical falsification in foreign nations (the video is available for reference and given with this application):



Indeed most medical diagnostics are falsified in foreign nations in order to try and further neurodegeneration.

## Tijuana, Mexico intermittently from March 2016:

In the US I moved to San Diego, California where Tijuana Mexico is driving distance from San Diego. Dr. Hugo Navarrete in Tijuana, Mexico was my attending neurologist when the doctors in San Diego, California (US) denied treatment. But medications were limited by the US with insurance restrictions, namely they made the medications unaffordable by stating that the prescription must come from a US physician or they wouldn't cover the cost. So the US directed falsifications of medical data internationally and then denied treatment based on falsified and

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fraudulated medical data domestically and then internationally by playing with insurance restrictions. Otherwise I always have medical insurance in the US so that is never an issue.

### **Mexico City, Mexico September 2017:**

After September of 2017 my condition had progressed to a far worse state, with a repeated lack of help in the US again (two ER appointments in San Diego where I was clearly going blind and the second where I was clearly immobile [hard to move]). The ER report in the second setting is stated in a condescending manner with clear presentation.

I went abroad to Mexico City where MRIs of the brain and spine were done. The US instructed the foreign nations to hide evidence of MS by falsifying the radiology reports but the MRIs still showed gross inflammation in the brain and spine, the treating neurologists in Tijuana and Mexico city recognized it anyway (they eventually wrote reports explain the quality of the MRIs for reference). The treating neurologists all ignored the falsified radiology reports (they understood it was fraudulated).

I was administered a medication called methylprednisolone in the hospital to temporarily reduce the prevalence of the condition in ER but it only works for a few weeks followed by a rapid and aggressive worsening of the condition. This was in September 2017. An MRI was done immediately after treatment in Mexico City to show the positive response, which the neurologist recognized but where the radiologist falsified the report as instructed by the US.

### **Brazil in October 2017:**

I flew to Brazil in October 2017 and the doctors in San Lucas Hospital in Rio de Janeiro recognized what was present in the MRIs and immediately give the medication (methylprednisolone) again in October 2017. (The medication given in IV is safe and doesn't produce any skin reactions, the US is to blame for any adverse effects due to a lack of treatment in the past).

### **Tijuana January 2017:**

After December I required another IV of methylprednisolone in January of 2018 in Tijuana, Mexico. The IV produced a positive response. (the positive responses are very temporary in my form of MS)

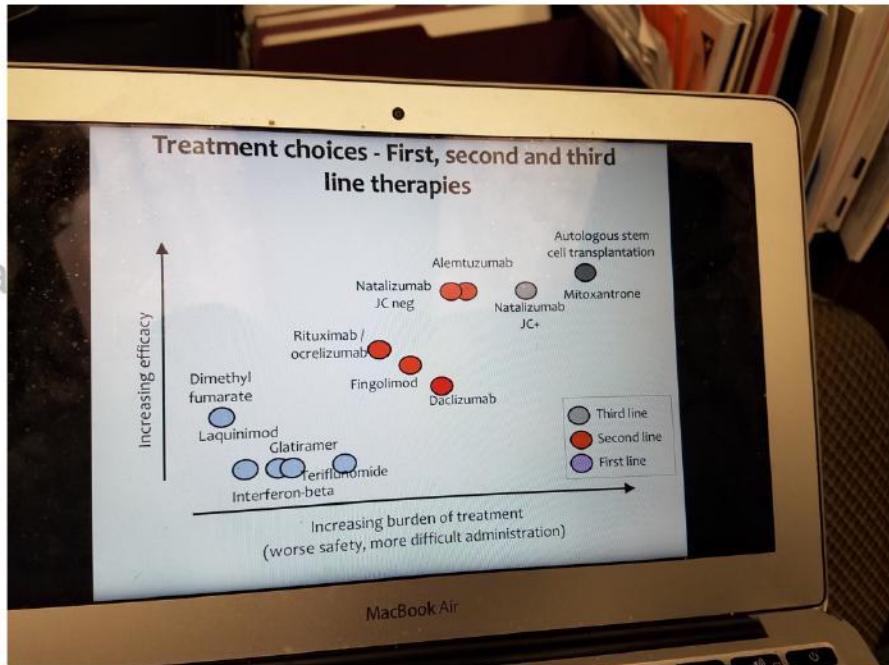
I did a eye test with a neurologist in Tijuana but the neurologist was instructed to lie about the quality of the optic neuropathy in the report though I was going blind. The medical falsification was directed by the US again. Though the data shows it the reports all proved to be falsifications soon due to the gross pathology of optic neuropathy demonstrated in an upcoming test.

### **Germany March 2018:**

It was clear and apparent that I needed the more complex medications for MS for a more serious form of MS but with the US denying any treatment I flew to Germany in March of 2018. The more effective medications are given in the slide below. All the red colored drugs above Fingolimod are given in more severe forms of MS:

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The hospital doctors at Charity Hospital in Berlin denied treatment in an ER setting twice and the outpatient doctor there did a Lumbar puncture to extract spinal fluid for testing. They once again falsified the results (as directed by the US); it was clear that the results were prefabricated because they appear 2 days after the test and the test takes 2 weeks to do. It should be noted that the US is extremely aggressive about defending clearly falsified medical tests. They use falsifications to defend other falsifications.

But the emergency still presented with an inability to move and worsening eyesight (there is a video for reference) so the military hospital in Berlin Germany (Bundeswehrkrankenhaus) gave the medications again and recommended an outpatient doctor in Berlin. They determined that the reason why I repeatedly end up in the ER is because there isn't consistent outpatient treatment with medications, US's insurance restrictions created this situation.

Dr. Stefanie Klaffke in Berlin, Germany then prescribed the medication for MS, Tecfidera. I purchased it but it costed more than 2000 USD for a month and a half supply. The medication produced a slightly positive effect but still proved to be inadequate (its not a red colored medication in the above slide).

#### **Thailand April 2018:**

In April of 2018 I flew to Bangkok Thailand where another course of IV methylprednisolone was given but with a before and after FDG PET (it measures glucose metabolism in the brain to determine dementia) to show response of the medication that my brain improves in functioning with the medication. The condition still leaves a gross presentation of dementia but improves with the IV.

I flew back to San Diego and asked for help in the hospital there and still with the repeated MRIs and FDG PETs the doctors in the hospital completely denied treatment and refused to acknowledge any medical findings to further negligence.

#### **Canada July 2018:**

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I also spoke to Dr. Jack Antel in Montreal, Canada in July 2018 and he recognized how this condition would have to be MS with both brain and spinal column neurodegeneration.

### **Latvia August 2018:**

I flew to Europe for a routine appointment with Dr. Klaffke and then to Latvia to do a repeat MRI for the brain and spine. The repeat MRI shows that hiding the features in the former MRI caused neurodegeneration in the spinal column. The MRI reports are again falsified. Its easy to show how the condition progressed due to a lack of appropriate treatment.

### **Thailand August 2018:**

Then in August 10<sup>th</sup> 2018 I flew to Bangkok Thailand again and the doctor there, Dr. Sasitorn of Bumrungrad Hospital ordered a optic neuropathy test and an eye test.

They both show a severe form of optic neuropathy that only presents in MS. Thus showing that most of the former reports were falsified and that me being denied treatment caused further damage to my eyesight.

### **Mexico September 2018:**

With my worsening condition I flew again to Mexico City, Mexico, where the neurologist at the largest private hospital there gave a procedure called plasmapheresis (it removes all the blood from your body and filters out the white blood cells) to try and stop the condition. This produced a positive effect and it made the medication prescribed by Dr. Klaffke more effective.

The reason why it had to be plasmapheresis and not the complex IV medications for MS (which are far more effective) is because the US restricts insurance payments for medications internationally that treat MS. (The letter in included in the “Documents that Demonstrate the Repeated Criminal Diagnostic Fraud and Criminal Negligence that Took Place in the US and Abroad” section).

### **Tijuana November 2018:**

All doctors there (Dr. Hugo Baez, Dr. Francisco Manjarrez, and Dr. Louis Amaya) recognize that I have a far more serious form of MS called secondary progressive MS which requires more effective medications than for relapse remitting MS.

In November 2018 I did a test called a Sensory Evoked Potential in Tijuana Mexico that checks the nerve conduction rate from the brain to the limbs. The doctor in Tijuana, Mexico was again instructed to falsify the results so she erases values in the test results and leaves the graphs that show nerve conduction rate deficits in the limbs, its easy to show the falsification in this instance. The US didn't want to acknowledge that they furthered the progression.

### **Germany December 2018:**

Within 2 months the condition worsened again and I saw Dr. Klaffke in Berlin, Germany. The doctors there recognized that I have a more sever form of MS that progressed and progresses

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unless the most effective medications are given (the denial of diagnostics and medications in the US for MS are to blame for the worsening course of MS).

I explore options for asylum at this point in foreign nations due to what is clear malice with intent to cause harm in a medical setting by the US. So I flew to Switzerland, Italy, France, Denmark and Sweden to determine if I could seek asylum there.

### **Narendra India January 2019:**

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I present in the hospital (Apollo Hospital) with a sever condition in January 2019 in New Delhi India. The neurologists recognized what was happening and give the medication for MS, Rituximab.

This medication is far more effective than all other medications given in the past and finally stabilized the condition within 2 months.

I am required to get the medication ever 6 months, the next IV being in July 29<sup>th</sup> 2019.

### **Thailand February 2019:**

I spoke with a UN officer there to show the malice taking place in a medical setting. The Officer understood that it is a form of terrorism, he termed it “bioterrorism” or “medical bioterrorism”.

### **Japan February 2019:**

I come to Japan to speak with research doctors in neurology. They understand the condition. I determined that I should prepare for asylum now considering the persistence of the US to further neurodegeneration.

### **Mexico March to May 2019:**

I fly to the US and then to Mexico. I ask the treating physicians in Mexico (Dr. Hugo Baez, Dr. Francisco Manjarrez, and Dr. Louis Amaya) to write clinical summaries that explain the condition and the progression of the condition. They write detailed reports.

I then come back to the US gather my things for asylum.

### **Japan May to July 2019:**

I go to Japan first to consider asylum but I decided against it since the wait time is 2 years for an asylum application. I decided that the UK was a better choice since its an English speaking country and its easier to communicate a large amount of data.

### **India Till July 23<sup>rd</sup> 2019:**

I get IV Rituximab again to help with the wait time for an asylum application in the UK in New Delhi, India under by Dr. P. N. Renjen. The hospital neurology team writes a history of the clinical condition and describes why I would need the medications.

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But the medications are still hindered by the US even in India; they direct a diagnostician to falsify a MRI report in the hospital in a gross way.

**United Kingdom July 24<sup>th</sup> onwards 2019 to 2020:**

I request for asylum intake the day I arrive in the UK on the 24<sup>th</sup> of July and the intake happens on the 5<sup>th</sup> of August 2019. I wait for the asylum interview while I do my best to manage the condition till now.

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