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CRYONICS INSTITUTE

NEWSLETTER

Cryonics insights and
information for members
and friends of the
Cryonics Institute



CI BULLETIN



Hello Everyone,

I hope you are all doing well during these trying times. With Covid, world politics, and a spattering of civil unrest it can be a little depressing, but cryonicists are indeed a rare breed. We are known for thinking outside the box and rising above any negative consensus. Instead of dwelling on bad news, we are extremely optimistic about life and the future. Why else would we be involved in cryonics?

It helps to really reflect on and look at the big picture and consider how good we really have it. The world is by no means a perfect place, but we truly are in a remarkable place in history and human progress. We are certainly much better off than our ancestors were throughout all of recorded history in terms of lifespan, technology, medicine, modern conveniences and so much more.

It is worth taking some time to reflect on and appreciate how good we have it and how fortunate we are looking at the grand scheme of things. The bottom line is to stay optimistic, roll up your sleeves and work on what you can to make the world a better place now - starting locally with yourself and your own sphere of influence. You may not work up to the community, national and even worldwide stage, but little things compound and if we are all working toward common goals the effect is profound. Consider that the Cryonics Institute started with one man's idea. That grew into a small, informal group of like-minded people, then an official organization and all the way through today, where we are now an international movement with nearly 2,000 members.

I am proud to be a part of this history, and happy to report the Cryonics Institute continues to expand. Most notably, we are completing the improvements on our second facility. We are currently reviewing and finalizing plans to retrofit the facility with a bulk LN2 tank and insulated supply lines for the cryostats that will be used to store patients once the existing facility reaches capacity.

On the financial front, the CI Board of Directors continues to monitor investments and operations to ensure the long term solvency of our organization. Despite challenges related to the covid epidemic, operations and patient care remain outstanding and have not slipped in the least. However, there are still some poor outcome situations that result directly from patient next of kin who are hostile to cryonics.

In numerous issues of this magazine as well as in articles on our web site and our other social media venues we continue to stress the critical importance of identifying, planning and preparing for circumstances and situations that could cause a person to **not** be suspended. Historically, the two biggest factors have been when family or friends actively block a member's suspension wishes and/or when they do not notify the cryonics provider of legal death or imminent death because the member didn't arrange for this or properly instruct their intended advocates ahead of time.

Dealing with relatives hostile to cryonics is admittedly a challenge, but timely notification is also of vital importance, and one of the easiest common-sense things to arrange for. In some of our negative outcome scenarios, the member was a recluse or put themselves in a situation where they would not be in contact with anyone for several days. It is perfectly reasonable to take time to be alone but regular check-in intervals with family and friends is just good common sense whether you are involved with cryonics or not.

To help reinforce the points above, I would like to give two examples of problem situations that have negatively affected a planned suspension. Sadly, these examples illustrate circumstances that have come up on more than one occasion and could have been prevented.

Case 1. A long-time cryonics member entrusts their next of kin to notify CI immediately in the event of death and to faithfully carry out their wish to be cryopreserved. Unfortunately, the next of kin decides **not** to notify the cryonics organization and quickly buries or cremates the patient instead,

often in order to collect on the life insurance proceeds that were set aside for suspension. Sometimes the family member does indeed collect the money intended for suspension, perversely being rewarded for betraying the trust that was placed in them. Sometimes the cryonics organization receives the money as a donation, but this depends on the non-suspension rider clause and how the member's wishes were documented. However, it is often not just how the paperwork is set up, but more importantly, what the next of kin **believes will happen to the money**. If it is clearly documented and understood up front that the next of kin will **NOT** receive the suspension money even if the patient isn't suspended, that removes a significant financial incentive for them to try to block the suspension.

Bottom line is that I would definitely set my will up to incentivize following my wishes and disincentivize not following those same wishes. It is also important to be very clear that your next of kin understands this and that your wishes are binding. Communication is key.

Case 2. A long time cryonicist who has extra funding and paid-up advanced standby, including air support, dies and remains unnoticed in their home for several days. They may have been introverted and preferred spending time alone, or simply the victim of bad timing and circumstances. In either case, they didn't have a social network in place, whether it was family, friends or neighbors, checking in on them regularly. They also didn't have any Cryonics Identification on their person, in their home or even in their car, so even if they were discovered in time, there is a good chance no one would be aware of their suspension arrangements and the outcome would likely be the same as not being found in time. CI provides Cryonics Identification bracelets, necklaces, wallet cards, refrigerator magnets and even a mobile

app to help with emergency notification. I personally use all of these options, and I urge you to do the same - please see our web site or contact us at info@cryonics.org to learn more about the Standby Notification Tools that are available to you. Our free **CI Check-In app** is available on the Google Play Store.

In both the above cases, and too many like it, a few simple changes in our paperwork and communications with next of kin could make a huge difference. In the latter case, a change of routine or some assistance from loved ones to simply look in on you would have made a difference. Nothing is perfect but having some basic plan in place is certainly worth the effort. You really need to have these talks with family and friends. If you have any questions or concerns please feel free to contact me directly. CI also has a members-only discussion group where you can ask questions about planning and brainstorm for unique situations. It is certainly important to stay optimistic in cryonics but let's be real and recognize that Cryonics is not a turn key operation. If you want a good outcome for your investment then you have a duty to do some research and DIY planning. Although the two above cases turned out poorly many others have turned out very successfully. In a rare few cases it was good luck, but otherwise all good suspensions involve solid planning and sympathetic next of kin. Most bad ones involve no planning and / or hostile next of kin.

Good luck and never give up the fight for your wishes. With a little hard work we can make the world a better place for the future starting with the present.

Best Wishes,

Dennis Kowalski

CI President

CRYONICS INSTITUTE MAGAZINE

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ARTICLE SUBMISSIONS

Cryonics Institute or cryonics-related articles are welcome. Submissions: dg@cryonics.org

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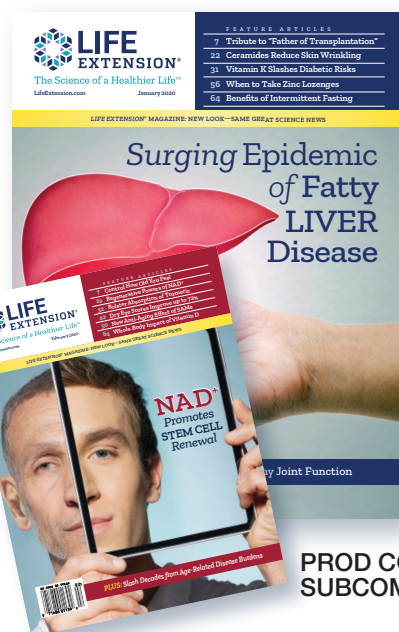
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Membership Benefits

Why join the Cryonics Institute?

1) **A Second Chance at Life**

Membership qualifies you to arrange and fund a vitrification (anti-crystallization) perfusion and cooling upon legal death, followed by long-term storage in liquid nitrogen. Instead of certain death, you and your loved ones could have a chance at rejuvenated, healthy physical revival through cryopreservation.

2) **Affordable Cryopreservation**

The Cryonics Institute (CI) offers full-body cryopreservation for as little as \$28,000.

3) **Affordable Membership**

Become a Lifetime Member for a one-time payment of only \$1,250, with no dues to pay. Or join as a Yearly Member with a \$75 initiation fee and dues of just \$120 per year, payable by check, credit card or PayPal.

4) **Lower Prices for Spouses and Children**

The cost of a Lifetime Membership for a spouse of a Lifetime Member is half-price and minor children of a Lifetime Member receive membership free of charge.

5) **Quality of Treatment**

CI employed a Ph.D level cryobiologist to develop CI-VM-1, CI's vitrification mixture which can help prevent crystalline formation at cryogenic temperatures.

6) **Standby Options and Assistance**

CI's use of Locally-Trained Funeral Directors means that our members can get knowledgeable, licensed care. Or members can arrange for professional cryonics standby and transport by subcontracting with [Suspended Animation, Inc](#) or [International Cryomedicine Experts](#) (I.C.E.) CI also offers Standby

Training Materials and Kits for members who choose to perform Local Standby.

7) **Affordable Funding Options**

Cryopreservation with CI can be funded through life insurance policies issued in the USA or other countries. Prepayment and other options for funding are also available to CI members.

8) **Cutting-Edge Cryonics Information**

Members receive a free e-subscription to the Cryonics Institute Newsletter, as well as access to our Facebook page, Twitter feed, YouTube channel and an official members-only forum.

9) **Helpful, Professional Support**

CI's professional staff is available to answer any questions and address any concerns you may have about CI, your membership or Cryopreservation.

10) **Additional Preservation Services**

CI offers a sampling kit, shipping and long-term liquid nitrogen storage of tissues and DNA from members, their families or pets for just \$98.

11) **Support Education and Research**

Membership fees help CI to fund important cryonics research and public outreach, education and information programs to advance the science of cryonics.

12) **Member Ownership and Control**

CI Members are the ultimate authority in the organization and own all CI assets. They elect the Board of Directors, from whom are chosen our officers. CI members also can change the Bylaws of the organization (except for corporate purposes).

*The choice is clear: Irreversible physical death, dissolution and decay,
or the possibility of a vibrant and joyful renewed life. Don't you want
that chance for yourself, your spouse, parents and children?*



To get started, contact us at:

(586) 791-5961 • email: info@cryonics.org

Visit us online at www.cryonics.org

Member Readiness Checklist

*You've signed up for cryonics -
what are the next steps?*

Welcome Aboard! You have taken the first critical step in preparing for the future and possibly ensuring your own survival. Now what should you do? People often ask "What can I do to make sure I have an optimal suspension?" Here's a checklist of important steps to consider.

- ☐ Become a fully funded member through [life insurance](#) or easy pre-payments
Some members use term life and invest or pay off the difference at regular intervals. Some use whole life or just prepay the costs outright. You have to decide what is best for you, but it is best to act sooner rather than later as insurance prices tend to rise as you get older and some people become uninsurable because of unforeseen health issues. You may even consider making CI the owner of your life insurance policy.
- ☐ Keep CI informed on a regular basis about your health status or address changes. Make sure your CI paperwork and funding are always up to date. CI cannot help you if we do not know you need help.
- ☐ Keep your family and friends up to date on your wishes to be cryopreserved. Being reclusive about cryonics can be costly and cause catastrophic results.
- ☐ Keep your doctor, lawyer, and funeral director up to date on your wishes to be cryopreserved. The right approach to the right professionals can be an asset.
- ☐ Prepare and execute a Living Will and Power of Attorney for Health Care that reflects your cryonics-related wishes. Make sure that CI is updated at regular intervals as well.
- ☐ Review the [CI Standby Manual](#) and other materials designed to help you with you Standby Planning. Also, consider joining or forming a local standby group to support your cryonics wishes. This may be one of the most important decisions you can make after you are fully funded. As they say-"Failing to plan is planning to fail".
- ☐ Always wear your cryonics bracelet or necklace identifying your wishes should you become incapacitated. Keep a wallet card as well. If you aren't around people who support your wishes and you can't speak for yourself a medical bracelet can help save you.
- ☐ Get involved! If you can, donate time and money. Cryonics is not a turnkey operation. Pay attention and look for further tips and advice to make both your personal arrangements and cryonics as a whole a success. The stronger our organization is, the stronger your chances of success.
- ☐ Keep your records, contact information and contracts up to date. It is recommended you review your relevant information annually at a minimum. One way is to schedule time to review all your materials at the same time you submit your required Annual Proof of Funding to CI. Also, Be especially aware of easy to forget things like a new email, phone number or address. Remember, you can also contact us at any time to ask if you have any outstanding paperwork or other info that needs to be updated.

The online [CI Members' Information Form](#) is a great resource for updating your current information on file.



Cryonics Institute 2020 Virtual AGM

As a response to current Covid restrictions, CI conducted our traditional Annual General Meeting virtually this past September 13 using the Zoom webinar platform. Apart from a few “newbie” hiccups, the meeting was a great success, and possibly the best-attended AGM in history with over 150 virtual attendees from around the world. We had guests from the US, Canada, Ireland, Spain, Australia, Germany, the Czech Republic and more.

Although we enjoy and prefer meeting in person every year where we can socialize and interact, clearly there is a benefit in providing convenient online access so both guests and speakers can attend and participate without any travel time or expense. Other advantages include clear screen sharing for presentations, archived video of the presentation, group chat, questions and answers and even polls and surveys (which we did not use this time.) With all this in mind, it is likely CI will be including a virtual component to supplement future live AGM's. That said, we do hope we can conduct our normal meeting in Michigan, USA next year.

This year's speakers included:

- Dennis Kowalski - CI President
- Pat Heller - CI Treasurer
- Steve Luyckx - CI Asst. Treasurer
- Joe Kowalsky - CI Asst. Secretary
- Rudi Hoffman, CFP
- David Ettinger
- Debbie Fleming - Immortalist Society
- Special Guest: Dr. Mary Ruwart

The complete webinar is available on CI's YouTube Channel:

<https://youtu.be/WQ91sWJegU>

* Please note, this replaces the former Zoom archive link.

Open Call to all Cryonicists

If you are interested in advancing the cause of cryonics and getting more involved, the following letter from Spain may be of interest to you!

Hello,

My name is Marco Baturan, I am a computer scientist and a member of the ACE (Spanish Cryonics Association,

<https://sociedadcrionica.org/>

We are an association and pressure group in favour of two objectives in our country; to allow the practice of cryonics and to be able to expatriate cryopreserved bodies. We are trying to make contact with as many organizations, groups,

associations, and persons as possible so that we can help each other and thus advance cryonics a little more in the world.

We also have a standby, perfusion and dispatch team, lawyers to work on the laws and we have them grouped in a sub-group called 'Cryonics Spain'

<https://sites.google.com/view/cryonicsspain/>

I hope that we can exchange knowledge and experiences that will help each other.

Best regards,

Marco Baturan.

UPDATE: Phishing Scammers Target CI

Regrettably, CI continues to be the target of phishing attacks fraudulently claiming to be the Cryonics Institute. This person or persons are messaging our members and asking them to send money to bank accounts and through channels not associated with CI.

We have forwarded complaints to several law enforcement agencies, ISP's and email providers in an attempt to stop the

problem but have had little success thus far. Unfortunately, phishing scams are big business in some countries, sometimes with the tacit approval and even support of local authorities and are therefore very difficult or impossible to shut down once and for all.

With that in mind, CI will continue to do our best to keep our members informed and aware of the problem.

WHAT TO LOOK FOR

- **INFO@CRYONICS.ORG IS CI'S OFFICIAL EMAIL ADDRESS:**
Email originating from ANY address other than **info@cryonics.org** is suspicious. Be sure to check the "from" address in emails you receive.
- **SOUND-ALIKE ADDRESSES:**
Beware of "sound alike" sender addresses like "cryonicsinfo@gmail," "cryonics.info@yahoo," etc. **Any address claiming to be CI that is not from info@cryonics.org is likely fraudulent.**
- **ASKING FOR "PAYMENTS":**
CI will always address you by name when sending your membership dues notices to you by email and CI will let you know on what date your dues are owed. If you are not being addressed by name and you are not given a due date that your dues are owed, it's a scam.
- **BILLS FOR "STANDBY":**
CI does not offer "Standby" service, so anyone asking for payment for "Standby," "Arrangements" or other vague services is definitely a scammer.
- **IMPERSONATING STAFF**
Many of the scam emails we have seen are "signed" "Andy Zawacki." Anyone can find CI staff or even Board Members' names online and use them fraudulently, so just because a message is "signed" with a familiar name does not mean it is really from that person. Always check the sender address to confirm.

• SUSPICIOUS PAYMENT METHODS:

CI will never ask for funds to be sent to personal PayPal accounts, remote Western Union or other "quick pay" type locations or mailed to addresses other than our Clinton Township headquarters. Asking for any payment to be made out to a party other than "Cryonics Institute" is also a red flag to look out for.

WHAT TO DO

- **DO NOT REPLY:**
Replying to scam emails only keeps CI members on scammers' "Active Target" list and encourages them to continue trying. DO NOT RESPOND.
- **DO NOT CLICK ON LINKS:**
If you receive a suspicious email with a link or attached file ignore both and forward the email to your email provider using "abuse@(your email provider)". Example: "abuse@gmail.com."
- **BLOCK THE ADDRESS**
Use your email program to block a phony address or mark it as junk mail.
- **PLEASE DO NOT FORWARD TO CI**
In the past we have asked members to forward these messages to us. Please do not forward and instead see below.
- **SUBMIT A SCAM REPORT**
File a scam report to the secure form here:
<https://form.jotform.com/203466556379164>.



CONFIRM PAYMENTS TO CI

* **NEVER TRANSFER MONEY** to a suspicious destination.

In order to further protect our members, CI has a security policy for bank transfer payments. If you are planning to make a payment via electronic transfer to CI, please **CONTACT US FIRST BY PHONE (1 (586) 791-5961)** to confirm the details for the transfer. NOTE: Regular annual or monthly PayPal payments are exempt from this policy.



Visiting Hours For Family Members of CI Patients

Monday	2:00pm - 4:00pm
Tuesday	2:00om - 4:00pm
Wednesday	2:00pm - 4:00pm
Thursday	2:00pm - 4:00pm

We ask that visitors kindly give us at least **one month advance notice** to ensure there are no scheduling conflicts. We cannot guarantee that the facility will be accessible to visitors who have not scheduled their visit in advance.

**** These visiting hours ar subject to change without notice due to patient or pet emergencies. ****

These requiirements have been established for multiple reasons, but most importantly for protecting our patients, members and facility.

Questions regarding visitation can be directed to Andy Zawacki, Facility Manager at info@cryonics.org or 1-586-791-5961.

Thank you!

Happy Holidays

*to all of our Members, Friends
and Supporters in the
Worldwide Cryonics Community!*

10 Worst Mistakes in Cryonics



1) Not signing up ahead of time

Becoming a member, having contracts in place, and having paperwork in order should not be a last minute decision. Waiting until the last minute or after death results in an unnecessary delay of care or worse- No suspension at all! Don't wait. Sign up here and be prepared. <https://www.cryonics.org/membership/>

2) Not providing proof of funding

Some people believe that they can worry about funding later or if they have funding, they have put off providing proof of funding to CI. This should be done annually. Failing to provide this can result in a delay of care while the funding clears, which can take weeks. Send your proof of funding to CI now to be prepared.

3) Not telling anyone your plans

Being reclusive or not telling family or friends your wishes is not recommended. You should not be afraid to tell those around you what your wishes are, especially your next of kin. Wearing a bracelet, necklace or having identification or other items in view can speak to your wishes. This is all you have when you can't speak for yourself. Disasters have resulted in the past from not sharing. Talk with your family, close friends and your estate attorney, so you can be prepared.

4) Not planning

Many think cryonics is a turnkey service where you can just sign up and let fate take over. No matter how much you pay for cryonics, you are the only one who can make sure that you will have the best chance by planning. CI has provided a lot of information on our website and in our standby manuals. Those who plan succeed those who don't fail.

For more information visit: <https://www.cryonics.org/resources/ci-standby-kits-and-instructions>

10 Worst Mistakes in Cryonics

5) Not notifying CI of Emergencies

There is no way that your cryonics provider can help you if they do not know of your emergency. Your family, friends, standby group or next of kin must immediately contact CI when you are having health issues or worse. It is also important for CI to know if you have up and coming surgeries or procedures, including terminal illness. Patients with a diagnosed terminal illness could enter hospice care, which might help your cryonics situation vastly. Any delay in notifying us directly could result in a poor suspension. Those helping you must have simple and clear instructions.

Here are some tips... <https://www.cryonics.org/resources/category/C57/57>

6) Committing suicide

Anyone who commits suicide who is not terminally ill or breaks a local law in doing so is potentially putting both themselves and our organization at great risk. CI will not risk itself for people who engage in behavior that goes against our mission to preserve life. Such activity will likely lead to an autopsy and long delays, rendering the suspension process substandard or impossible to carry out.

Do not consider cryonics as a way out of your problems. You are likely to not get suspended under those circumstances. If you do not have a terminal illness and are considering suicide, you should seek mental health advice and treatment as soon as possible. <https://www.mentalhelp.net/articles/depression-hotline/>

7) Engaging in Risky or illegal activities

Risky behaviors or associations that lead to the patient dying around suspicious circumstances will also likely lead to mandated autopsies that will also stand in the way of your cryonics wishes. It is best to use common sense and not put yourself in harm's way. Not only could your life be ended, so too could your chances of cryonics suspension or future reanimation. Use common sense and stay safe.

8) Providing financial or legal incentives that encourage your not being suspended.

Leaving all of your insurance or cryonics money to family if you are not suspended is certainly an option at CI, but ironically it does provide financial incentive for hostile family members to block your suspension. As often is the case, people will make sure you are not suspended to get a hold of your money.

One suggestion is to leave family and next of kin some separate money from cryonics funding while suggesting that Cryonics funding go to cryonics as a donation no matter if you are buried or suspended. In addition, family or next of kin can be further compelled to cooperate if they will actually lose the money that is allocated to them for not cooperating. It is also suggested that your family be made fully aware of your wishes and stipulations, so they know what the results of their actions will be. You want to make sure you put incentives and disincentives in the correct place, so that

your wishes are honored. It is suggested that your will and cryonics documentation reflect this and get reviewed by an attorney. See <https://www.cryonics.org/resources/protect-yourself-from-legal-threats>

9) Not removing a hostile next of kin from rights to your remains and finances

In many states and areas you can legally remove a hostile family member or next of kin from your estate. You can reassign someone who is sympathetic to cryonics and who has the legal authority to disposition of your remains, as well as your assets. In some states and locations there are disposition of remains reassignment documents, as well as powers of attorney, both in regards to financial as well as medical decisions. The executor of your will or anyone involved with making decisions should be sympathetic to your cryonics wishes. It is your responsibility to make your wishes very clear and to remove any doubt or potential legal resistance from family or next of kin.

We suggest seeking legal advice to help you in this regard. Some members have even made a video statement of their wishes and given it to both their cryonics organization as well as their attorneys. Not being careful could mean that you don't get suspended, despite your wishes. Many are surprised to learn that they lose their rights upon legal death. See an attorney and prepare.

10) Dying under less than favorable conditions

This seems harder to control than the other situations, but there are some things you can do to make your situation more favorable. You can diet, exercise and follow the latest official medical advice to stay healthy longer. The longer you are alive, the better the technology will probably be for suspending you and the closer we will be to a future that may be able to reverse your condition.

You can also avoid travel to remote or hostile places where such travel is risky. Some overseas travel can result in long delays both logistically and bureaucratically. In general, dying near your cryonics provider or cryonics standby group helps your chances. Living a healthy lifestyle and staying sociable, while surrounding yourself with people who will act on your behalf is paramount. Building solid, positive relationships with good people is probably one of the most important things you can do to have your wishes honored. Take care of yourself and maintain social connectivity.



CI MEMBERSHIP

OCTOBER 2020

Members 1,725

Patients.....	196
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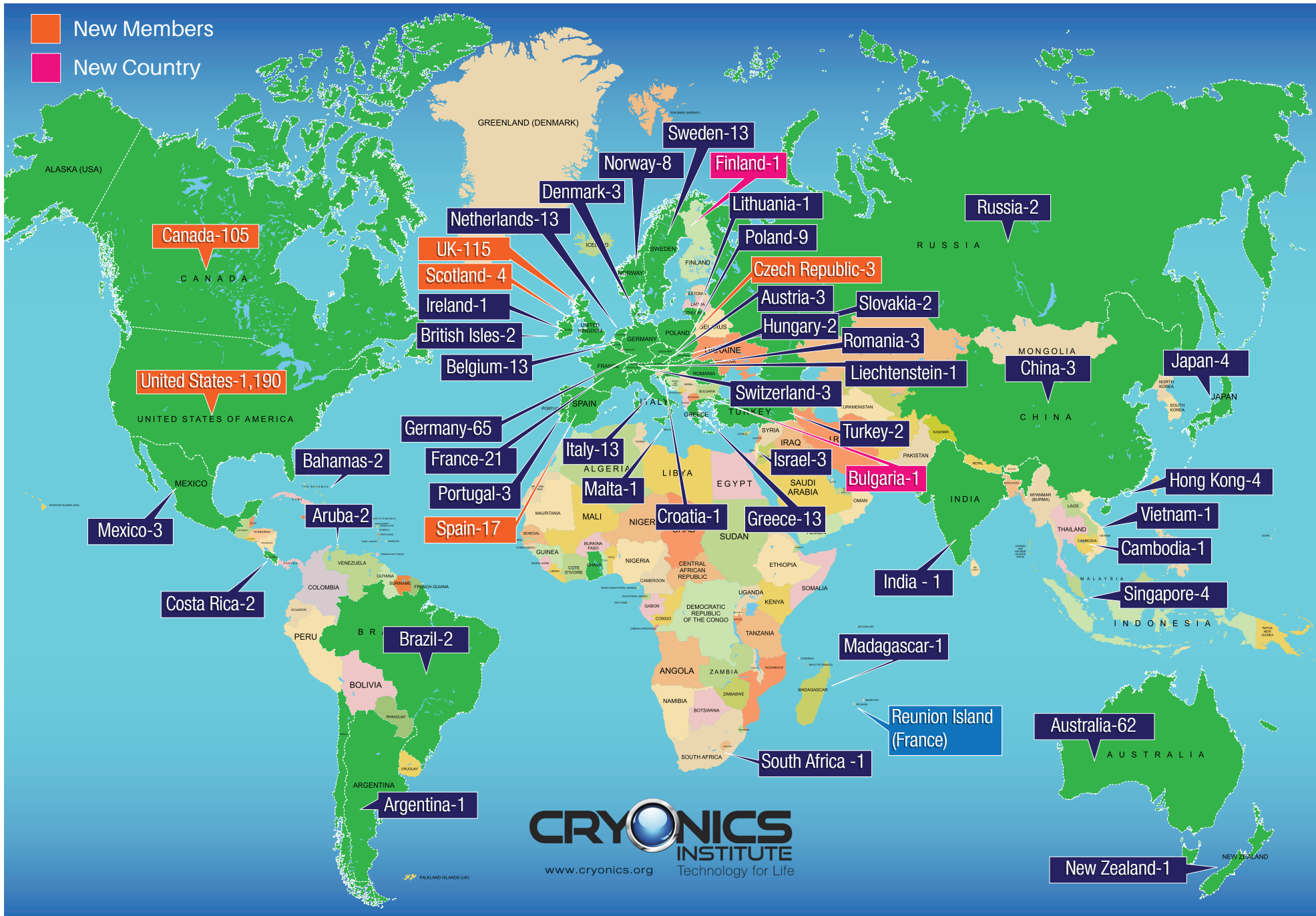
Pets 191

DNA/Tissue 309

SA 285

TOTAL

1,921



Who will be there for YOU?



Don't wait to make your plans. Your life may depend on it.



Suspended Animation fields teams of specially trained cardio-thoracic surgeons, cardiac perfusionists and other medical professionals with state-of-the-art equipment to provide stabilization care for Cryonics Institute members in the continental U.S.

Cryonics Institute members can contract with Suspended Animation for comprehensive standby, stabilization and transport services using life insurance or other payment options.



Speak to a nurse today about how to sign up.

..... **Call 1-949-482-2150**

or email tabitha@suspendedanimationinc.com



Minnesota Cryonics Rapid Response

What we've done, so far.

We had our first meeting.

On August 11, 2018, eleven cryonicists mostly unknown to each other met in a library meeting room in St. Anthony, Minnesota. We called our planning and discussion group, "Minneapolis Cryonics."

Using their membership lists, Hillary of the Cryonics Institute and Diane of the Alcor Life Extension Foundation had generously helped us announce our meeting by way of repeated emails to Minnesota members. The willing attitude of Hillary and Diane was motivating, and helped us to an encouraging start.

We had nineteen more meetings.

We decided to meet on a monthly basis, and talked about helping each other, and about helping CI and Alcor help us. We brainstormed what we might do, and how we might do it. We agonized in circles over the laundry list of cryonics topics and concerns.

We talked about the cryonicist's false sense of security. We talked about worst-case scenarios. Then the virus hit. We talked about Zoom meetings, but ended up on the occasional phone call, and exchanging the occasional email. And we looked back at what we'd done to that point.

About the author

Chuck Bartl is the president of Minnesota Cryonics Rapid Response (MCRR), and a funded member of both the Cryonics Institute and the Alcor Life Extension Foundation. To Chuck, death first seemed a possibility when his next-door neighbor, Mr. Brunskill, died.

It occurred to Chuck that this was a really bad idea. He subsequently asked his mother if he could achieve immortality by drinking more milk, and later, against all odds, tried to hatch a chicken egg from the refrigerator in a sock under a gooseneck lamp.

Decades later, and now much smarter, he saw Robert Ettinger on his favorite late-night excuse for not doing homework, "The Tomorrow Show with Tom Snyder." It was what he'd been waiting for, a real-life cryonics contact. He rang up NBC on a rotary phone and received a little blue postcard in the mail with Ettinger's number on it. The call was made.

More decades passed. Chuck began spending winters within walking distance of Alcor in Scottsdale, Arizona, planning an eventual residence near a cryonics facility. Then, out of the blue, his sister, who had absolutely never broached the subject of cryonics, declared her interest in being cryopreserved. This with absolutely no previous proselytization from Chuck.

Chuck was very surprised. His sister had no intention of leaving the Minneapolis-St. Paul area, so Chuck decided to start a local cryonics response group in Minnesota. It seemed simple enough at first. Then, overwhelming. In the following article, Chuck relates a brief history of MCRR.

We found a funeral director on our seventh try.

Lining up a funeral director to be on our team seemed a relatively straightforward task. On the phone, more than a few seemed quite agreeable to the idea. In reality, they didn't seem agreeable to the idea of returning phone calls or emails.

One of our members had an uncle who worked at a funeral home. This was going to be easy. We took his uncle to lunch and asked him to approach the owner on our behalf. Still no funeral director.

One of our members seized the moment at a friend's mother's memorial service and approached the hosting funeral director. He also turned out to be one of those agreeable guys who didn't like to return phone calls or emails.

Then one day, one of us decided to call a nearby funeral home. We asked if we could stop by and discuss "prearrangements." "Come on down," was the heartening response.

After our pitch, the funeral director said, "Business is business," and inspired by Dennis Kowalski's "Dollars 'N' Donuts" funeral-director template, we handed him a crispy \$100 bill. He didn't want it. But we insisted. We weren't gonna let this one go. Number seven was the charm.

His funeral home was an independent fourth-generation, family-owned operation run by him, his younger brother

and his early-twenty-something son. One of our members had a non-cryonicist family member cremated there to help reinforce our new relationship. They offered to let us meet in their conference room. And to transport us to Detroit.

But, as promising as this situation appeared to be, we wanted at least one back-up funeral director. How hard could it be? While surfing the Internet for young, independent funeral directors, we came across a feature article on a young, independent funeral director in the Minneapolis Star Tribune.

We contacted him. We mentioned cryonics. He was willing to talk. As luck would have it, he lived a few blocks from one of us and we had lunch. He was interested. And ambitious. One of his specialties was picking up bodies for medical donation. He had plans to set up a network of funeral directors in outstate Minnesota to pick up bodies.

His wife was a funeral director. Three other funeral directors worked for him. He had a small fleet of vehicles. He knew other local funeral directors with fleets of vehicles. He had a special surgical knack with carotid arteries. And coincidentally, he occasionally rented space from our first funeral director. Turns out, number eight was a charm, too.

We met a medical examiner at a coroner open house.

One of the many topics we discussed in our meetings was the dreaded medi-

cal examiner delay, and worse yet, the dreaded medical examiner delay followed by the dreaded autopsy.

In our research, we came across the following statement: "Minnesota law dictates that a medical examiner or coroner must investigate all deaths that occur under "suspicious, unusual, or unexpected circumstances," but allots significant discretion to the medical examiner to determine if, and when, to perform an autopsy."

Recalling a past discussion with a helpful cryonics pioneer, it occurred to us that it might be beneficial to have a good working relationship with a medical examiner. Someone who gets us.

One day, while checking out medical examiner websites, looking for medical examiners to approach, we came upon what appeared to be a unique opportunity: a coroner's open house. This might be a chance to make a face-to-face contact, we thought. Maybe the tour guide knew a nice coroner they could introduce us to at a later time. This might work better than an easily dismissed cryonics cold call.

So, three of us registered for and attended the after-hours open house. We weren't going to mention cryonics during the actual tour unless an obvious opportunity presented itself. The tour group was split into two smaller groups, each to be led through the facility by one of two different tour guides.

As luck would have it, one of the tour guides was an actual medical examiner who had stayed late to help out.

She seemed approachable. One of us made sure to be in her group.

It was an interesting and informative tour as far as medical examiner tours go. A young girl attending with her parents wanted to be a medical examiner when she grew up. Minnesota music icon, Prince, had been a customer there. They had us look at X-rays and guess how the bones had been broken. Somebody guessed, "Mafia."

After the tour, we introduced ourselves to the medical examiner. She was friendly, and agreed to meet with us at a later date. Unfortunately, we weren't able to set a date with her before the virus became an issue. We hope to get our meeting when it's over.

The large geographic area her office serves includes 26 Minnesota counties. If we could establish an understanding relationship with her and the other medical examiners in her office, it would be invaluable. Maybe she could introduce us to the other major Minnesota offices. Maybe we could end up with a good working relationship with the entire state.

We toured a long-term care facility/hospice services provider.

Two of our members had travelled to Michigan to talk to CI, and to check out potential hospice services in the area. It seemed like a good idea to do the same in the Twin Cities metropolitan area of Minneapolis-St. Paul.

Before the meeting, three of us met

at a coffee shop across the street and planned our strategy. We agreed to wait for an optimal moment to bring up the subject of cryonics.

When the facility tour was over, without having mentioned cryonics, we asked the tour guide a question: "Is there a social worker around we could talk to?"

Within minutes, we were in a conference room talking to the head social worker. Our 86-year-old member gently brought up his cryonics wishes. The head social worker found him charming and sincere, and offered to set up a meeting with the head of nursing. And the head administrator.

We were taken aback. One of our members had recently visited a hospital administrator at another facility, getting a far different response: "You'll never get a bag of ice in here."

We asked for paramedic resumes on Indeed.

The issue of paramedics had come up in our very first meeting. We knew we needed the sense of urgency that a funeral director might not have. One of our members was thinking about becoming a paramedic himself.

We weren't sure how to go about recruiting paramedics. We thought about inquiring at a school for paramedics. We'd been warned that it's not a good idea to show up at the firehouse to recruit. We were hesitant to start calling around. Why would a paramedic want to bother with us? We sat on it.

Then, one day, many months later, while talking to an ex-Alcor medical response director, we were introduced to the idea of simply placing an "ad for paramedics." We took out a free ad on Indeed, and the responses immediately started coming in. Before the free-ad period ended, we had around 40 resumes, many of them very impressive.

We arranged a couple of interviews, three paramedics at a time at the library, along with two or three members of our group. We had pizza delivered and gave them each a cash award for showing up. We wanted to give them the sense that we were serious about what we were trying to do, and that they would be appreciated, and fairly, if not generously, compensated.

We subsequently had individual lunch meetings with our two top picks. Both are experienced firefighters and flight medics with supervisory backgrounds. We talked about the possibility of supervisory, training and recruiting roles within our group. They were both very interested.

We'd like to get them trained. We've been holding out for face-to-face training, but because of the virus situation, we may have to settle for Zoom sessions for now. Our immediate goal would be to have a couple of paramedics on the ground in Minnesota who could follow basic, emergency, stopgap phone directions from Alcor, CI, SA or I.C.E.

Ultimately, we'd like to build a long on-call list of paramedics with sophisti-

cated cryonics-specific skills.

We talked to a physician assistant.

We also placed an Indeed ad for physician assistants. And talked to one at lunch. The hope being that they might be cheaper, and more available to make a declaration of death than a doctor. Any physician assistant would need to be under the authority of an actual physician.

One of our members came up with this idea. It seemed worth pursuing. We aren't fully informed on the issue yet, but we're looking into it.

We talked to a lawyer.

We went to a lawyer to get some advice on paperwork. Specifically, medical directives, power of attorney and HIPAA. He gave us some useful tips on how the HIPAA form would work, how best to distribute it, and how to keep it up to date.

We showed the attorney a Minnesota medical power of attorney form we'd pulled off the Internet. He said it was OK, but suggested a better one that he normally recommends.

When we showed him the Advance Medical Directive/Medical Power of Attorney form from the Alcor website, he was impressed, and called it the clear choice. The language is specific to cryonics, well written and quickly understandable. And it's set up so either Alcor or CI can be checked off as the cryonics facility of choice.

Our goal is to make sure all our members take advantage of all the helpful and potentially critical cryonics-related paperwork available. We are far from that seemingly simple goal. But we're working on it.

We tried some recruiting.

We have a small core of loyal members who try to attend most of our meetings. Additional loyal members would really help. We signed up for a paid meetup service called "Meetup," which organizes online groups to host in-person events for people with similar interests. Another good idea by one of our members.

So far, through Meetup, eighteen new individuals have joined our online group, "Minneapolis Cryonics." Very encouraging, although to date, only three of these individuals have actually attended one of our library meetings. Despite strong encouragement to do so.

We hope they really have an interest in cryonics, and that they're not just joiners. Intuition and experience tell us that there are a lot of people out there with at least a mild interest in cryonics who aren't acting on it.

To be honest, we've had a problem getting some known cryonicists to attend our meetings. Based on Alcor and CI membership numbers in Minnesota, there are at least a handful of members out there who not only don't attend our meetings, but have never responded to us in any way despite three or four

email invitations from CI and Alcor on our behalf.

Are they out there? Have they moved? Do they not check their spam? Are they ill? What are they thinking? Also, we've had a few cryonicists attend only a single meeting, despite extra encouragement to keep coming.

We'll keep at it. If you tally up the number of people who have contacted us in one way or another, and then add in the previously mentioned handful of non-contacters, our group would number over forty.

Maybe they're waiting for us to become more established. Maybe they're procrastinators. Maybe they have a false sense of cryonics security. Maybe they think meetings aren't useful. Maybe they're busy living their lives. Other stuff to do. Maybe all of the above and more. We sure could use their help and encouragement.

We put together an emergency phone list.

In the event of an emergency, we want people to know who to call. And we want anyone who can help in some way to know what's going on. Of course, CI and Alcor are at the top of the list, right after 9-1-1. So far, the list also includes our members, our funeral directors and a dry-ice manufacturer. Sooner than later, we'd like to add the paramedics and any other pertinent contacts we come up with.

We started a members' needs list.

The more we know about our fellow members, the more potential there is to help them. Do they have all their funding and paperwork in order? Are they with CI or Alcor? What kind of insurance do they have? Do they have a medical power of attorney? HIPAA forms? Do they have a particular medical condition? Do they live alone? Do they have an outside advocate? Do they have cooperative family? On and on. Maybe they have somebody answering their emails telling us that, "He'll never be frozen."

Some of the information that could be useful might seem too personal to put on our list. But it could end up being critical in an emergency. We have a long way to go on this list, but we started one, and we think it's important.

We stored some insulation at Dave's house.

After getting a short tutorial on shipping requirements from an experienced cryonicist friend, we assembled the necessary materials to properly package a Ziegler case.

We went to Lowe's and purchased insulation, moisture-barrier wrap, little chunks of wood for support and air circulation, and duct tape. And we stored it at a local member's home. The idea was to have it all on hand if needed in an emergency.

Our funeral director says he'll have a Ziegler, cardboard boxing material and a shipping tray available for our use, but we're thinking of purchasing

a Ziegler or two of our own, just in case. We've also discussed our need for other emergency equipment, from simple to sophisticated, depending on how involved an operation we can expect to undertake.

We set up a private website.

In addition to providing general cryonics information to our members, the idea of a private website was to give quick access to personal paperwork in an emergency. So we don't have to go rummage through people's bedrooms at the last minute.

In a perfect world, it would contain continually updated medical information on members, as well as completed legal documents, like HIPAA forms, wills, cryonics-facility paperwork, "don't autopsy" forms, medical power of attorney, etc. Anything that might help. This project is in its infancy.

We started a nonprofit.

The more legally and business-minded members in our group thought it might be advantageous to organize as a 501(c)(3). So we did. We called ourselves "Minnesota Cryonics Rapid Response" or MCRR. We selected a president, a chief financial officer and board members. We set up a bank account.

A member generously picked up the costs to set everything up properly, and to consult with an attorney on ongoing legal and accounting concerns. Applying for grants through this

nonprofit is being considered.

We set up a public website.

We needed a website for our nonprofit. Once our website posted, a surprising number of people immediately responded, wanting to help. Unfortunately, it was mostly people wanting to tell us how to efficiently run the website for a price. For now, we're keeping it simple, using it as a point of contact, with a short mission statement and a headline that reads, "Maybe life doesn't have to be short."

We started a GoFundMe campaign.

We talked about fundraising. Maybe a bake sale. Or a booth at the Minnesota State Fair. We explored crowdfunding. We ended up posting a GoFundMe called, "Freeze Hank."

One of our more dedicated members, Hank, graciously agreed to be our poster boy. The idea is to help raise funds for the good of our entire group. We attached a tagline to our effort. It says, "Supporting Cryonics In Minnesota Is Supporting Cryonics Everywhere." We firmly believe that.

A GoFundMe approach doesn't appeal to everyone. As a group, we're putting it out sparingly for now, as to not be too pushy, and to see what the feedback is. We're hoping other cryonicists will help us get it out there more aggressively on social media.

We hope prospective cryonicists see

it. We hope everybody else sees it, too. We hope it goes viral. We hope to get many small donations as a show of support. We hope we hit the jackpot. We hope it works. But we're not depending on it. We thought it was worth a shot. Anything we get will help. Live and learn.

We talked to the airlines.

In an attempt to gain a better understanding of shipping logistics, we contacted a few different airlines flying out of Minneapolis-St. Paul. One didn't allow wet ice. One had restrictions on dry ice. We got conflicting answers on the legal paperwork needed. Even from different customer service reps within the same airline.

Funeral directors will, of course, help with this. But we feel that the more we know about all the details, the more prepared we'll be to monitor the process, avoid confusion and take the most efficient action possible in an emergency. We've also looked into the idea of using private medical flights through insurance-premium payment.

We talked to a dry-ice manufacturer.

We asked what it would take to get a dry-ice guy out of bed at 3am on Christmas to deliver some dry ice. The answer: "Three-hundred." It sounded like a bargain. A lot of people we know

wouldn't get out of bed for that.

We had thought it would be a good idea to talk to a dry-ice guy about our potential cryonics needs in advance, rather than wait until 3am on Christmas, when he'd almost certainly think it was a prank. "Hey, we got a dead guy here, can you deliver some dry ice right away?" "Sure thing, Santa."

So far, we've only talked to this individual once on the phone. He sounds like a character. We'd like to meet him in person. We plan a relationship-building visit in the not-too-distant future. We'll probably grease his palm.

NOTE: We have at least one member in our group who abhors the idea of a straight freeze. But, I'm sure every cryonicist knows someone whose first choice actually is a straight freeze. And most of us will take it if it's the only alternative in an all-too-common bad situation.

We dreamed big.

One of our more medically knowledgeable and determined members feels that our best bet is to get our own oxygenation and circulation equipment to keep patients viable on a ground transport to Michigan or Arizona. In our own appropriately equipped vehicle. With our own specially trained team.

The idea initially sounded like a pipe

dream. But, then again, to be a cryonicist is to be a bit of a dreamer. So, we'll definitely pursue that possibility as time, finances and expertise permit. In fact, it's already being seriously looked into.

Dreams aside, in conclusion, we're not anywhere near where we need to be. If we had an emergency today, we'd be in big trouble. So far, we've dodged the bullet, although four of our members have experienced potentially serious hospital stays in our relatively brief existence as a group.

The few things we do have in place might help. But we feel we need to train and further motivate our funeral directors and a growing list of dependable on-call paramedics as soon as possible.

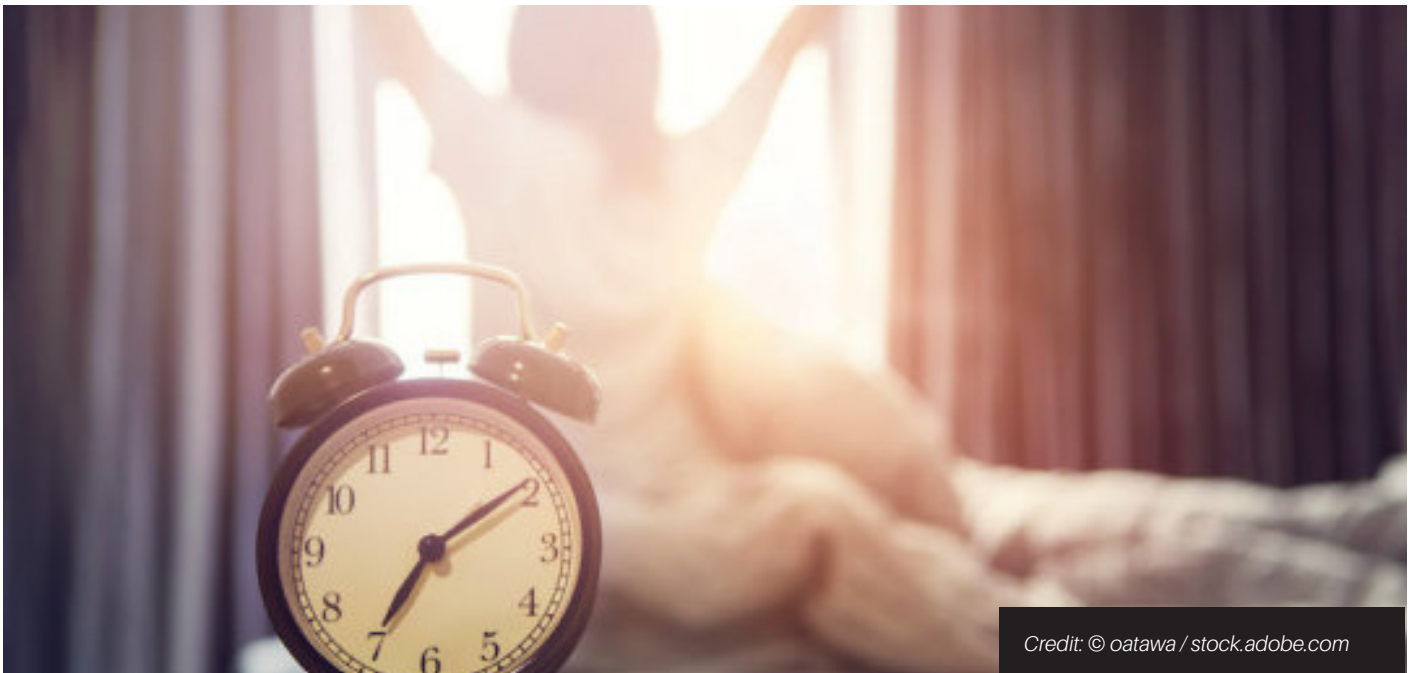
We'll start with a couple of paramedics and funeral directors trained in the ground-floor basics. Looking back, it's probably the first thing we should have done. It's definitely the first thing we should have done. Too much thinking. Too much discussion. Not enough action. Time passes quickly.

Regardless, now that all that thinking and discussion has taken place, we hope it will serve us well as we attempt to guide increasingly significant action toward a reliable, effective response team in Minnesota. And maybe inspire that action beyond.

Not The End!

Healthy sleep habits help lower risk of heart failure

November 16, 2020 | Source: American Heart Association



Credit: © oatawa / stock.adobe.com

Adults with the healthiest sleep patterns had a 42% lower risk of heart failure regardless of other risk factors compared to adults with unhealthy sleep patterns, according to new research published today in the American Heart Association's flagship journal *Circulation*. Healthy sleep patterns are rising in the morning, sleeping 7-8 hours a day and having no frequent insomnia, snoring or excessive daytime sleepiness.

Heart failure affects more than 26 million people, and emerging evidence indicates sleep problems may play a role in the development of heart failure.

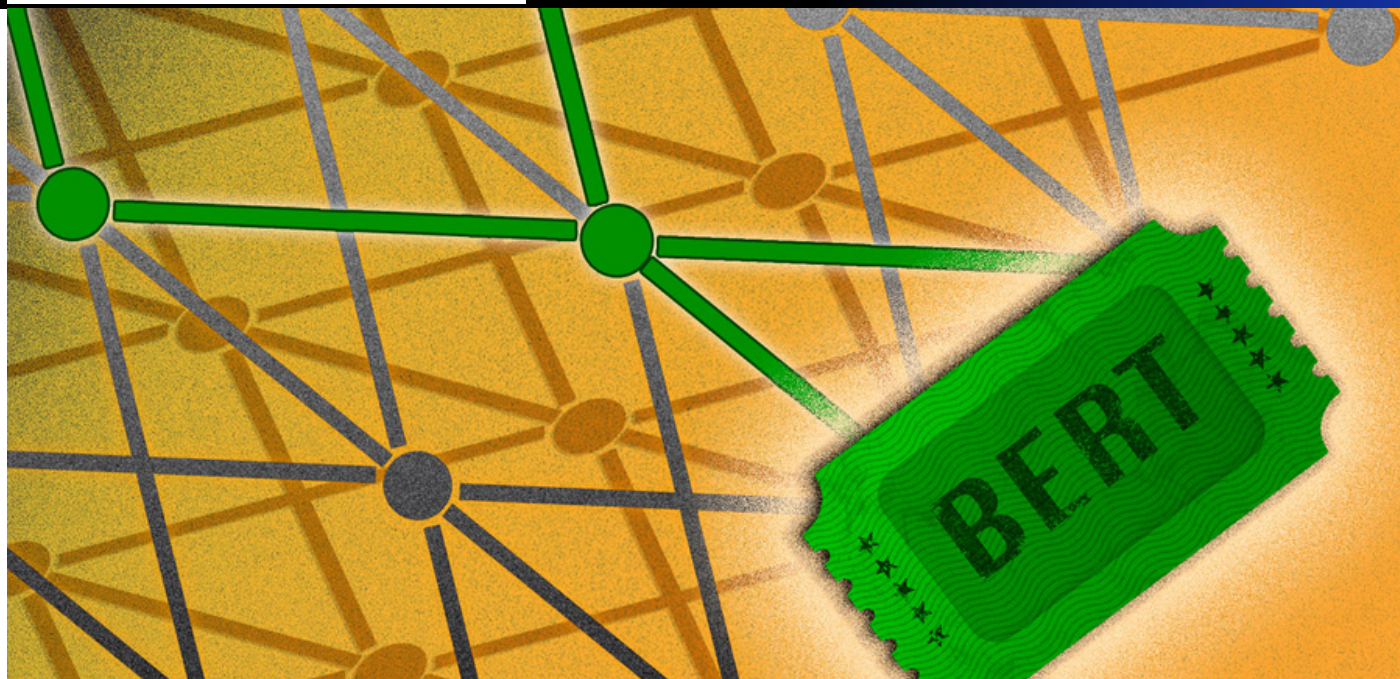
This observational study examined the relationship between healthy sleep patterns and heart failure and included data on 408,802 UK Biobank participants, ages 37 to 73 at the time of recruitment (2006-2010). Incidence of heart failure was collected until April 1, 2019. Researchers recorded

5,221 cases of heart failure during a median follow-up of 10 years.

Researchers analyzed sleep quality as well as overall sleep patterns. The measures of sleep quality included sleep duration, insomnia and snoring and other sleep-related features, such as whether the participant was an early bird or night owl and if they had any daytime sleepiness (likely to unintentionally doze off or fall asleep during the daytime).

"The healthy sleep score we created was based on the scoring of these five sleep behaviors," said Lu Qi, M.D., Ph.D., corresponding author and professor of epidemiology and director of the Obesity Research Center at Tulane University in New Orleans. "Our findings highlight the importance of improving overall sleep patterns to help prevent heart failure....."

[ARTICLE CONTINUES AT SCIENCEDAILY.COM](https://www.sciencedaily.com)

MIT News**from NEWS.MIT.EDU**

Shrinking massive neural networks used to model language

Daniel Ackerman | MIT News Office | Publication Date: December 1, 2020

You don't need a sledgehammer to crack a nut.

Jonathan Frankle is researching artificial intelligence — not noshing pistachios — but the same philosophy applies to his “lottery ticket hypothesis.” It posits that, hidden within massive neural networks, leaner subnetworks can complete the same task more efficiently. The trick is finding those “lucky” subnetworks, dubbed winning lottery tickets.

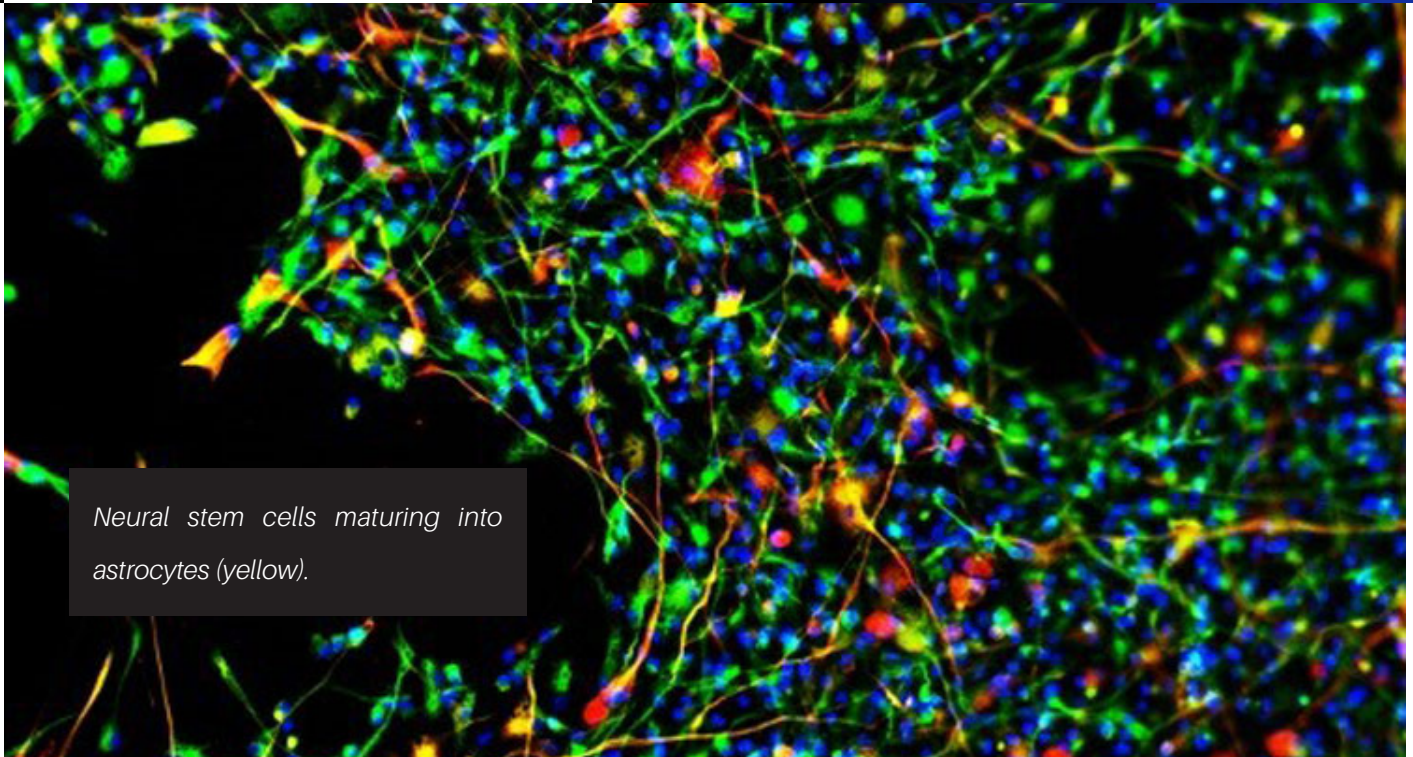
In a new paper, Frankle and colleagues discovered such subnetworks lurking within BERT, a state-of-the-art neural network approach to natural language processing (NLP). As a branch of artificial intelligence, NLP aims to decipher and analyze human language, with applications like predictive text generation or online chatbots. In computational terms, BERT is bulky, typically demanding supercomputing power unavailable to most users. Access to BERT's winning lottery

ticket could level the playing field, potentially allowing more users to develop effective NLP tools on a smartphone — no sledgehammer needed.

“We’re hitting the point where we’re going to have to make these models leaner and more efficient,” says Frankle, adding that this advance could one day “reduce barriers to entry” for NLP.

Frankle, a PhD student in Michael Carbin's group at the MIT Computer Science and Artificial Intelligence Laboratory, co-authored the study, which will be presented next month at the Conference on Neural Information Processing Systems. Tianlong Chen of the University of Texas at Austin is the lead author of the paper, which included collaborators Zhangyang Wang, also of UT Austin, as well as Shiyu Chang, Sijia Liu, and Yang Zhang, all of the MIT-IBM Watson

ARTICLE CONTINUES AT [NEWS.MIT.EDU](https://news.mit.edu)



Neural stem cells maturing into astrocytes (yellow).

World's first: Drug guides stem cells to desired location, improving their ability to heal

November 24, 2020

Discovery represents a major milestone for regenerative medicine that could help more people benefit from stem cell therapy

Scientists at Sanford Burnham Prebys Medical Discovery Institute have created a drug that can lure stem cells to damaged tissue and improve treatment efficacy—a scientific first and a major advance for the field of regenerative medicine. The discovery, published in the Proceedings of the National Academy of Sciences (PNAS), could improve current stem cell therapies designed to treat neurological disorders such as spinal cord injury, stroke, amyotrophic lateral

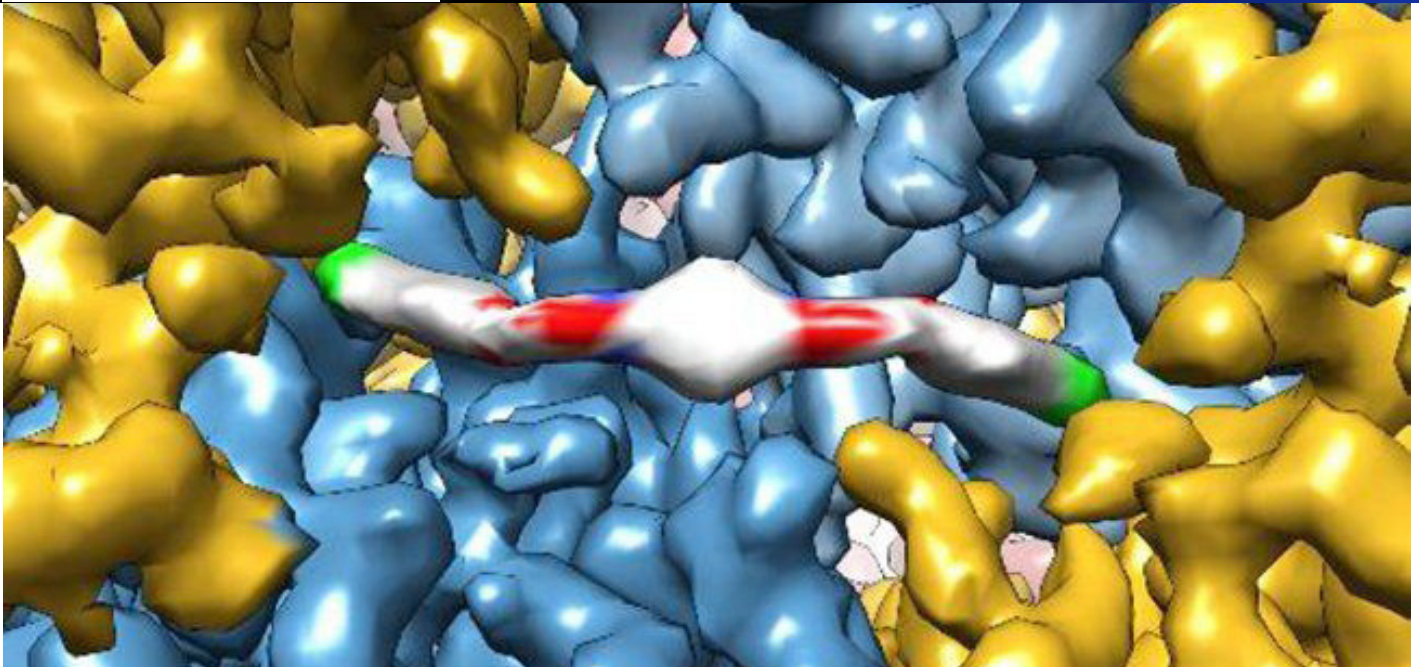
sclerosis (ALS) and other neurodegenerative disorders; and expand their use to new conditions, such as heart disease or arthritis.

"The ability to instruct a stem cell where to go in the body or to a particular region of a given organ is the Holy Grail for regenerative medicine," says Evan Y. Snyder, M.D. Ph.D., professor and director of the Center for Stem Cells & Regenerative Medicine at Sanford Burnham Prebys and senior author of the study. "Now, for the first time ever, we can direct a stem cell to a desired location and focus its therapeutic impact."...

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from UCSF.EDU



A cryo-electron microscope rendering of an ISRIB molecule. Image by the Adam Frost lab

Drug Reverses Age-Related Mental Decline Within Days

By Nicholas Weiler

Just a few doses of an experimental drug can reverse age-related declines in memory and mental flexibility in mice, according to a new study by UC San Francisco scientists. The drug, called ISRIB, has already been shown in laboratory studies to restore memory function months after traumatic brain injury (TBI), reverse cognitive impairments in Down Syndrome, prevent noise-related hearing loss, fight certain types of prostate cancer, and even enhance cognition in healthy animals.

In the new study, published Dec. 1, 2020, in the open-access journal *eLife*, researchers showed rapid restoration of youthful cognitive abilities in aged mice, accompanied by a rejuvenation of brain and immune cells that could help explain improvements in brain function.

"ISRIB's extremely rapid effects show for the first time that a

significant component of age-related cognitive losses may be caused by a kind of reversible physiological "blockage" rather than more permanent degradation," said Susanna Rosi, PhD, Lewis and Ruth Cozen Chair II and professor in the departments of Neurological Surgery and of Physical Therapy and Rehabilitation Science.

"The data suggest that the aged brain has not permanently lost essential cognitive capacities, as was commonly assumed, but rather that these cognitive resources are still there but have been somehow blocked, trapped by a vicious cycle of cellular stress," added Peter Walter, PhD, a professor in the UCSF Department of Biochemistry and Biophysics and a Howard Hughes Medical Institute investigator. "Our work with ISRIB demonstrates a way to break that cycle and restore cognitive abilities that had become walled off over time."....

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The New York Times

from NYTIMES.COM

To Power A.I., Start-Up Creates a Giant Computer Chip

By Cade Metz | Aug. 19, 2019

SAN FRANCISCO — The largest computer chips would usually fit in the palm of your hand. Some could rest on the tip of your finger. Conventional wisdom says anything bigger would be a problem.

Now a Silicon Valley start-up, Cerebras, is challenging that notion. On Monday, the company unveiled what it claims is the largest computer chip ever built. As big as a dinner plate — about 100 times the size of a typical chip — it would barely fit in your lap.

The engineers behind the chip believe it can be used in giant data centers and help accelerate the progress of artificial intelligence in everything from self-driving cars to talking digital assistants like Amazon's Alexa.

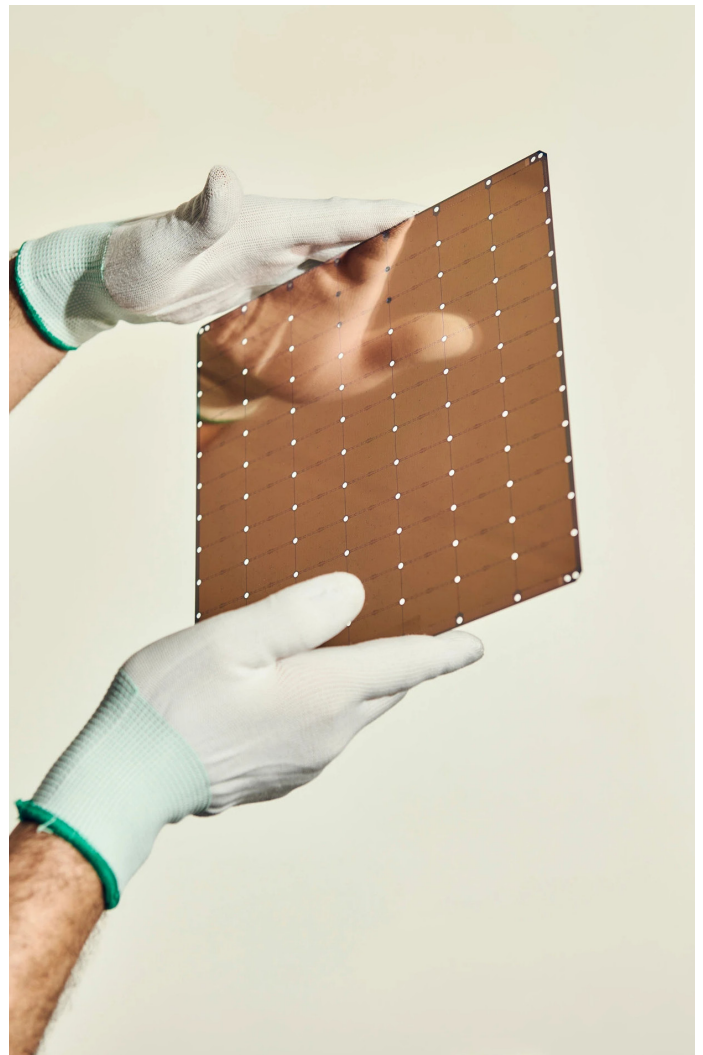
Many companies are building new chips for A.I., including traditional chip makers like Intel and Qualcomm and other start-ups in the United States, Britain and China.

Some experts believe these chips will play a key role in the race to create artificial intelligence, potentially shifting the balance of power among tech companies and even nations. They could feed the creation of commercial products and government technologies, including surveillance systems and autonomous weapons.

Google has already built such a chip and uses it in a wide range of A.I. projects, including the Google Assistant, which recognizes voice commands on Android phones, and Google Translate, which translates one language into another.

"There is monstrous growth in this field," said Cerebras's chief executive and founder, Andrew Feldman, a chip industry veteran who previously sold a company to the chip giant AMD.

New A.I. systems rely on neural networks. Loosely based on the network of neurons in the human brain, these....



Cerebras says its computer chip is the largest ever built: as big as a dinner plate, or about 100 times the size of a typical chip. Credit... Jessica Chou for The New York Times

[ARTICLE CONTINUES AT MYTIMES.COM](https://www.nytimes.com/2019/08/19/technology/cerebras-chip.html)



Higher nutrient levels associated with better brain connectivity, function

The March 2019 issue of *NeuroImage* published findings from researchers at the University of Illinois of an association between higher plasma levels of specific nutrients and improved brain connectivity and cognitive performance in older individuals.

The study included 116 participants aged 65 and 75 years. Plasma samples collected from the subjects were analyzed for 32 nutrients that are present in significant amounts in a Mediterranean diet. Subjects underwent tests of general intelligence, executive function and memory. Functional magnetic resonance imaging (fMRI) of the brain assessed brain network efficiency within seven connectivity networks.

"The basic question we were asking was whether diet and nutrition are associated with healthy brain aging," stated senior author Aron K. Barbey, of the Beckman Institute for Advanced Science and Technology. "And instead of inferring brain health from a cognitive test, we directly examined the brain using high-resolution brain imaging."

Nutrient biomarker patterns associated with better cognitive performance included omega-3 polyunsaturated fatty acids, omega-3 plus omega-6 polyunsaturated fatty acids, carotenoids, lycopene, and vitamins that included.

folate. Higher omega-3 fatty acids, omega-6 fatty.....

[ARTICLE CONTINUES AT LIFEEXTENSION.COM](https://www.lifeextension.com)



Worldwide Cryonics Groups

AUSTRALIA: The Cryonics Association of Australasia offers support and information for Australia & nearby countries. caalist@prix.pricom.com.au. Their Public Relations Officer is Philip Rhoades. phil@pricom.com.au GPO Box 3411, Sydney, NSW 2001 Australia. Phone: +6128001 6204 (office) or +61 2 99226979 (home.)

BELGIUM: Cryonics Belgium is an organisation that exists to inform interested parties and, if desired, can assist with handling the paperwork for a cryonic suspension. The website can be found at www.cryonicsbelgium.com. To get in touch, please send an email to info@cryonicsbelgium.com.

BHUTAN: Can help Cryonics Institute Members who need help for the transport & hospital explanation about the cryonics procedure to the Dr and authorities in Thimphou & Paro. Contacts : Jamyang Palden & Tenzin Rabgay / Emails : palde002@umn.edu or jamgarnett@hotmail.co Phones : Jamyang / 975-2-32-66-50 & Tenzin / 975-2-77-21-01-87

CANADA: This is a very active group that participated in Toronto's first cryopreservation. President, Christine Gaspar; Vice President, Gary Tripp. Visit them at: <http://www.cryocdn.org/>. There is a subgroup called the Toronto Local Group. Meeting dates and other conversations are held via the Yahoo group. This is a closed group. To join write: csc5@cryocdn.org

QUEBEC: Contact: Stephan Beauregard, C.I. Director & Official Administrator of the Cryonics Institute Facebook Page. Information about Cryonics & perfusion services in Montreal for all cryonicists. Services available in French & English: stephan@cryonics.org

CHILE: Community oriented to provide reliable information on human cryopreservation, as far as technical scientific as well as other practical aspects. Dissemination, awareness and education on issues related to the extension of life in general and cryonics in particular. Contact José Luis Galdames via galdamesjoseluis@gmail.com or via Facebook at [Cronica Chile](#).

FINLAND: The Finnish Cryonics Society, (KRYOFIN) was established in 2008 and is an organization collaborating with all nearby groups and organizations. Contact them at: kryoniikka.fi Their President is Ville Salmensuu ville@salmensuu.fi

FRANCE: SOCIETE CRYONICS DE FRANCE is a non profit French organization working closely with European cryonics groups. For more information: J.Roland Missionnier: phone: 33 (0) 6 64 90 98 41 or email: cryonicsnews.inpi@gmail.com • [Facebook group](#)

Francecryonics-Webnode Vivien Gruss, member of Cryonics Institute, has opened a web site for the information of persons interested in cryonic suspension.

GERMANY: DGAB There are a number of Cryonicists in Germany. Their Organization is called "Deutsche Gesellschaft für Angewandte Biostase e.V.", or short "DGAB". More information on their homepage at www.biostase.de. If there are further questions, contact their Board at vorstand@biostase.de

GERMANY: CRYONICS-GERMANY is an active group providing cryonics support, including a special 8-member Standby Response Team. Members from Germany or Internationally are welcome to join. at <http://cryonics-germany.org>. Direct inquiries to contact@cryonics-germany.org.

INDIA: Can help Cryonics Institute Members who need help for the transport & hospital explication about the cryonics procedure to the Dr and authority in Bangalore & Vellore Area. Contacts : Br Sankeerth & Biooster Vignesh / Email : vicky23101994@gmail.com Phones : Biooster / 918148049058 & Br Sankeerth / 917795115939

ITALY: The Italian Cryonics Group (inside the Life Extension Research Group (LIFEXT Research Group)) www.lifext.org and relative forum: forum.lifext.org. The founder is Bruno Lenzi, contact him at brunolenzi88@gmail.com or Giovanni Ranzo at: giovanni1410@gmail.com

Kriorus Italy: Representative Filippo Polistena, email: filippopolistena45@gmail.com. phone: +39 334 298 9378

JAPAN: Hikaru Midorikawa is President Japan Cryonics Association. Formed in 1998, our goals are to disseminate cryonics information in Japan, to provide cryonics services in Japan, and eventually, to allow cryonics to take root in the Japanese society. Contact mid_hikaru@yahoo.co.jp or <http://www.cryonics.jp/>

NEPAL: Can help Cryonics Institute Members who need help for the transport & hospital explanation about the cryonics procedure to the Dr and authorities in Kathmandu. Contact : Suresh K. Shrestha / Email : toursuresh@gmail.com Phone : 977-985-1071364 / PO Box 14480 Kathmandu.

THE NETHERLANDS: Dutch Cryonics Organization is the local support group since 2002 and able to provide advice, standby, perfusion and shipment 24/7, in case of need. We are an active group utilizing the latest equipment. New members from The Netherlands welcome.

E-mail: info@cryonisme.nl
website: <http://www.cryonisme.nl>

NORWAY : Can help Cryonics Institute Members who need help for the transport & hospital explication about the cryonics procedure to the Dr, funeral home and authority at Sandvika. Contacts : Gunnar Hammersmark Sandvika Begegravelsesbyrå / Phones : 011-47-2279-7736

HELP US STAY UP-TO-DATE!

Please send any corrections or changes to the address below. If you know of, or are considering starting a support, standby or other cryonics-related group in your area, please send details to

dg@cryonics.org.



RUSSIA: KrioRus is a Russian cryonics organization operating in Russia, CIS and Eastern Europe that exists to help arrange cryopreservation and longterm suspension locally, or with CI or Alcor. Please contact krorius@gmail.com for additional information or visit <http://www.krorius.ru>. Phone: +7 962 947-50-79

SWEDEN: www.kryonik.se or Facebook: Svenska Kryonikföreningen. Initially, the society will focus on providing information and assistance to those who wish to sign up for cryonics. Eventually, we also hope to provide practical assistance in cases, possibly in collaboration with other European groups.

SWITZERLAND: www.cryosuisse.ch

CRYOSUISSE The Swiss Society for Cryonics is an active group with over 30 members. To join, email info@cryosuisse.ch

UNITED KINGDOM: Cryonics UK is a nonprofit UK based standby group. www.cryonics-uk.org Cryonics UK can be contacted via the following people: Tim Gibson: phone: 07905 371495, email: tim.gibson@cryonics-uk.org. Victoria Stevens: phone: 01287 669201, email: vicstevens@hotmail.co.uk. Graham Hipkiss: phone: 0115 8492179 / 07752 251 564, email: ghipkiss@hotmail.com. Alan Sinclair: phone: 01273 587 660 / 07719 820715, email: cryoservices@yahoo.co.uk

Can help Cryonics Institute Members who need help, funeral home, transport at London. Contact : F.A. Albin & Sons / Arthur Stanley House Phone : 020-7237-3637

INTERNATIONAL: The Cryonics Society is a global cryonics advocacy organization. www.CryonicsSociety.org. They publish an e-newsletter *FutureNews*. Phone: 1-585-643-1167.

Please note, this list is provided as an information resource only. Inclusion on the list does not constitute an endorsement by the Cryonics Institute or our affiliated organizations. We urge our readers to use this list as a starting point to research groups that may meet their own individual needs. We further note that readers should always use their own informed judgment and a reasonable amount of caution in dealing with any organization and/or individual listed.



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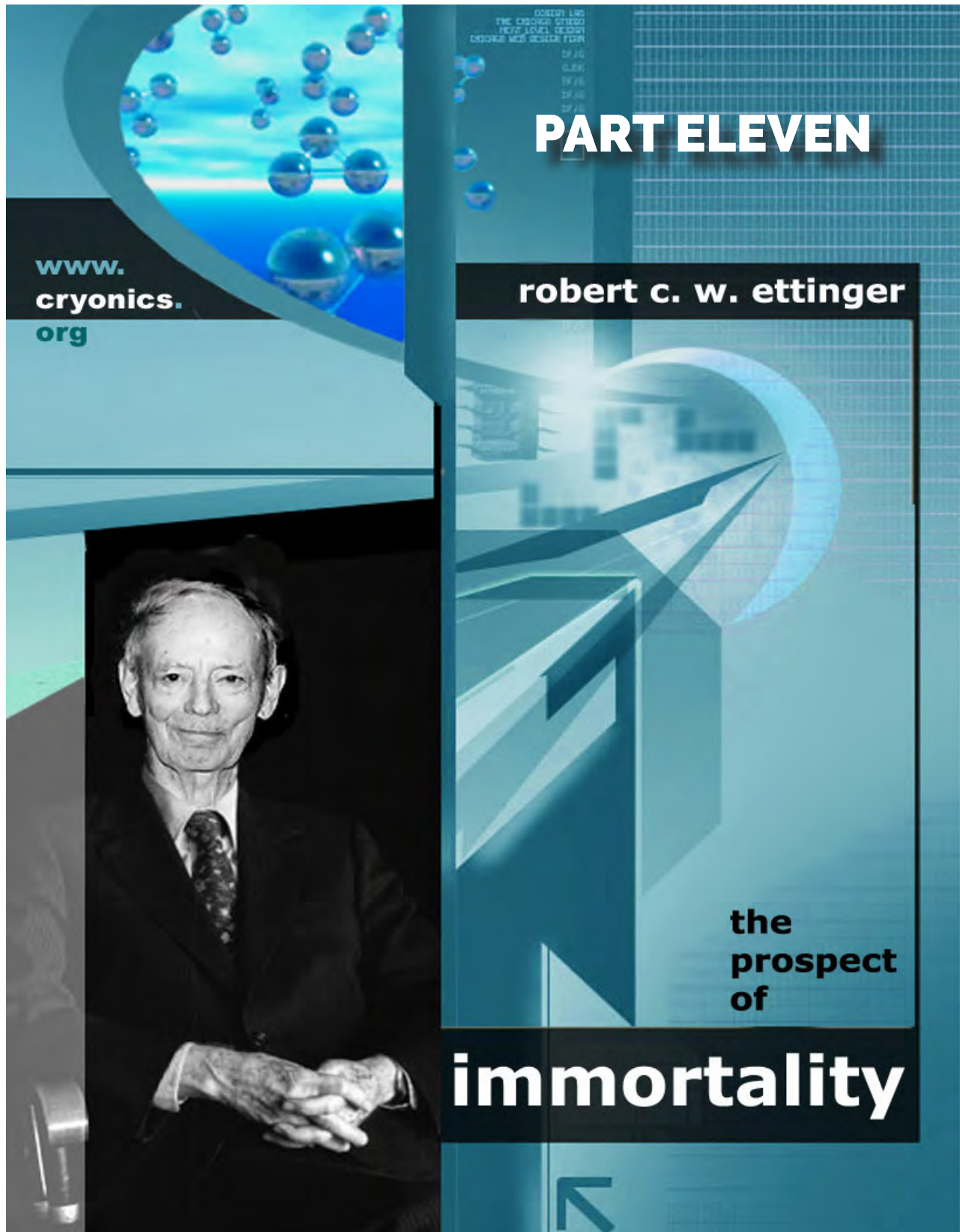
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CHAPTER XI

The Freezer-Centered Society

Besides being definitely feasible, the freezer-centered society is highly desirable, and in any case nearly inevitable. This can be seen by illuminating more brightly, or from slightly different angles, a number of aspects introduced earlier.

Inevitability of a Freezer Program

It is easy to perceive that a large-scale freezer program must inexorably develop, sooner or later, whether or not my degree of optimism becomes general, and whether or not my personal efforts exert much influence.

We recall that suspended animation of humans (by freezing alive, without serious freezing damage, so that the subject can be thawed out and restored to active life at any time) is generally agreed to be in the cards. So far as I know, not a single expert doubts that this will come about, although there are wide differences of opinion as to when the technique will be mastered. Estimates vary' from about five years on up; my general impression is that a consensus might point to success within the lifetimes of a majority of people now living.

As soon as suspended animation is practicable, persons with incurable diseases will surely be frozen alive to await the time that cures are discovered. It can scarcely be doubted that this development, at the very least and latest, would provide the entering wedge for the freezer program.

It is also a common assumption of both laymen and experts that medical science will

find means of extending human longevity, at least in moderate

degree. It is not likely to come in the form of a simple drug injection, although this remains conceivable and hints in this direction crop up from time to time. For example, a Royal Oak, Michigan, veterinarian, Dr. Henry Raskin, has been reported experimenting on dogs with a drug developed in Rumania, called GH-3; results in apparent revitalization of aged dogs are said to range from fair to spectacular. (17) More likely, the treatment will be complex and will only follow much longer study, but optimism is not lacking. Dr. Joseph W. Still, of George Washington University, has written: "Aging may prove to be no more fatal or inevitable than smallpox, polio, pneumonia, or tuberculosis." (111)

Now consider the outlook of an aged person in failing health, sometime late in this century, or maybe not so late. Suspended animation will be available; substantially increased longevity for those already old may not yet be at hand but research will be very promising; technology will be booming and wealth increasing by leaps and bounds. Obviously, there will be a great temptation to take the cold sleep for a few decades, or until a specified amount of progress has been made. On awakening, this man and his wife can anticipate at least some added decades of active life in a more advanced world; in addition, compound interest will put him in a better financial situation. Why not sleep a seeming moment, and wake to a longer, brighter day? Who would not trade a few declining years in the present for a larger number of more active and rewarding years in the future?

Many, perhaps, would not -- but certainly many would. Some will make this choice, and others will follow, and finally it will become customary if not universal. Whether it comes soon or whether it comes late, whether the aim is "immortality" or something more modest, a large-scale freezer program is certainly going to mount, a majestic and irresistible tide.

Whoever would play the misguided and pathetic role of Canute, let him then he warned: he can only suffer dampened dignity.

No Generation of Martyrs

Since there is going to be a freezer program anyway, and since the frozen will share the immortality of their descendants, the rationale of opposition, if there ever was any, evaporates. Both immortality itself and the preliminary freezer program will bring their weighty problems, or exacerbations of old problems, but these can only be solved and not prevented.

If by some stretch of the imagination a determined and concerted opposition to an early freezer program should cohere, its utmost effect could be to deny immortality to our own generation. A more monumental exercise in futility and sheer stupidity would be hard to conceive.

When an initially adverse reaction to the freezer idea is voiced, no matter what "reasons" may be given, it is usually based on nothing but pure funk. The idea unsettles people; it makes them nervous; it disturbs the established order; it raises questions and demands decisions. To many, especially those long beaten down by adversity, nothing is so precious as the "security" of a fixed routine and a known end; it is notorious that in the death camps of Nazi Germany many inmates

refused any risk, preferring certain death to exertion.

Ostensible reasons for opposition often include various forms of asserted altruism. "We shouldn't burden later generations." "The future doesn't need us; I wouldn't want to live on unless I could do some good." "The money freezers would cost should be spent on cancer research or longevity research." "I'd rather a year were added to the life of a cancer victim than hundreds of years to my own." (The last two, of course, are non-sequiturs.)

Such self-styled altruists, who would martyr our generation, understand neither society nor themselves.

We may be largely the intellectual heirs of the Greeks, but our moral heritage is Judeo-Christian, and in this tradition no babes are exposed on hillsides nor thrown to the wolves, no grandfathers are abandoned to die on

the trail. We risk a division to rescue a battalion; we carry our wounded with us. We recognize duty downward as well as upward, from the state to the individual as well as conversely.

In fact, the worship of the State, or the Race, or Society, or Posterity, is merely a twisted and senseless sentimentality characteristic of totalitarian ideologies; it is nothing but fanaticism. In an important sense, there is no such thing as the state, no such thing as posterity: there are only individual people, and the living deserve as much consideration as the unborn. When someone who wouldn't give an extra hundred tax dollars to save a real, starving Indian claims he would sacrifice his life to make things easier for some hypothetical descendant, he is merely making an ass of himself.

In any case, of course, the direct remedy to the "burden" problem is easy: let us practice industry and thrift, so that the money for freezers is either extra money produced by extra work, or else savings diverted from fripperies. We can pay our own way, and need not be mendicants. Our estates and trust funds, through their investments and administrators, will contribute to future production and will share in control of the means of production. While we owe a moral debt to the future, the future will owe us not only a moral but a legal debt.

As to our "usefulness" in the future, it has already been pointed out that after resuscitation and rejuvenation we will be just as educable and adaptable as anyone else, young or old.

After maybe forty thousand years of struggling through the wilderness, the race has arrived at the banks of Jordan. Crossing will not be easy, nor will life in the Promised Land. But to pitch camp on the near shore for a generation would be a bootless waste.

It seems nearly certain that most of us will either see the point or will be initially in doubt. At first a few, and then mounting numbers will choose freezing, and before long only a few eccentrics will insist on their right to rot. Most people will not dare be left behind. There will be no generation of martyrs.

The Long View as Panacea

Well worth repetition, emphasis, and elaboration is the startling transformation in human relations which the freezer program will gradually work.

Not so long ago Sydney J. Harris, a syndicated columnist, remarked the effect on many people of the realization that we only live once. " 'I shall not pass this way again.' Then

why does it matter what I do? Why not ruin the fields, deforest the woods, litter the roads, pollute the streams, trample the flowers, and treat people as a mere means to one's own ends?" (39)

Although Harris was making a different point, it is obvious that a man who expects to be around for centuries or millennia will tend to behave differently from one who anticipates scant decades. In the long view, the fields, woods, roads, streams and flowers are my own; I cannot waste resources because I myself will need them later. I cannot cheat or injure a stranger, I cannot disregard his rights and feelings, because there are no more strangers, but only neighbors whom I will have to look in the face, again and again.

It has been fashionable for some time to say that "complex problems do not have simple solutions"; this is a favorite excuse of lack-wit politicians. Nevertheless, the simple use of soap and water cuts a very wide swath across the complex problem of disease prevention, and the simple routine of formal courtesy does wonders in ameliorating complex problems of human relations. Likewise, I believe the freezer program will prove virtually a panacea, particularly in international relations - not because in itself it solves all problems, but because it provides time for the solution of problems.

With an unlimited future to redress the balance, everyone can put up with temporary burdens and inequities patiently, if not cheerfully, and negotiate in good will. We all have a long, long way to travel together. When tempted

to some rash action, one need only say to himself, "The end is not yet. The end is not yet. The end is not yet."

All measures of desperation, including nucle-

ar war, will tend to be ruled out. The reckless are usually those with little to lose - and there will be no more such, everyone will have a jewel beyond price - a glittering physical hereafter on the other side of the freezer. Heaven help Mao Zedong if he tries to persuade his people to turn their backs on this treasure, wrap themselves in tattered red flags, and lie down in moldy graves.

Time to Go Sane

Human life has always been based largely on fanatic lies and self-deception, a consequence of the endless struggle to solve the unsolvable, reconcile the irreconcilable, and scrutinize the inscrutable. Most of us have always preferred make-believe to frustration. But now at last it will be safe to go sane - at least partly.

The loyalties of the past have been mainly to ideas - usually stupid ideas, like the divine-right monarchies of post-medieval Europe, and often revolting ideas, like the blood-sacrifice rituals of the Aztecs. But the loyalties of the future will be to people - not disembodied abstractions, but individual human beings - and in this direction lies sanity.

Of course, in a sense it is only possible to be loyal to one's own thoughts, and in a sense other people are only thoughts. It is also true that doublethink and compromise with honesty will retain some utility. Still, the shift in viewpoint will be very real and very significant.

We have usually thought of people as ephemeral, and ideas, especially "principles," as immortal. But now the people will persist while ideas come and go, and the results should be most salutary.

Consider again the arch-villain Mao Zedong. Would he dare risk a fabulous life of thou-

sands of years (including personal wealth eventually exceeding

the total assets of the world today) for a moth-eaten bag of slogans and a shabby empire? Eternity, or some substantial portion of it, belongs not to Marxism-Leninism, nor to any other passing fancy in the mind of Mao, but to Mao himself and his relatives and friends -- including you and me. Once he understands this, he dare not risk war. If he cannot understand, those who do will remove him.

Fools, Madmen, and Heroes

Even after considerable thought, some people have to fight the feeling that to seek personal immortality is somehow ignoble, that the freezer-entered society is somehow distasteful and may rob us of our manliness. The reason is partly that bravery in the face of death has always been deemed a virtue, that abstract ideals are extolled above "selfish" ones, and that logic may seem to equate immortality with timidity. Even though the error of these notions has already been indicated, another remark or two will not be out of place.

Immortality is not an end in itself, nor do we reach for it in blind and breathless panic. It is an opportunity for growth and development otherwise impossible, and it is consistent with our highest current values.

The prospect of immortality will strongly color our lives, and in some ways dominate them, but it will by no means exclude other influences. We remain the products of our conditioning. I myself, for example, have been near death more than once, and would face it again without hesitation for any good reason, such as danger to my family or country.

We must ever bear in mind the gulf between

the logical and the psychological. It has been noted that the long view will tend to rule out all measures of desperation; but some acts of madness or irresistible impulse will remain. On the other side, heroism will remain available not only because we are specifically trained for it, but because the subjective value of immortality, while large, cannot approach its face value. This is easily seen by remembering the behavior of Christians: in logic, nothing whatever is

worth an eternity of hellfire, yet through the quirks of psychology countless millions are willing to be damned for the sake of paltry temptations.

Further, pondering of the problem of identity may convince some that extinction is nothing to worry about.

Finally, the steady workings of the process of natural selection will assure a continuing supply of heroes. A society without a sufficient percentage of risk-takers would scarcely be viable, let alone competitive.

These considerations also tie in with the misguided proposals that the freezer program be used as a eugenic sieve.

The Fallacy of Just-Freeze-the-Elite

One sometimes hears the naive asseveration, "Maybe we ought to save Churchill, but why should we save Joe Schmoe?"

The answer is easy, and comes in four parts:

1. Joe, after the future medicos work him over (although not necessarily immediately after resuscitation), will be just about as high-type and just about as useful as Sir Winston. He

will no longer be the prisoner of his genetic inheritance.

2. If we are thinking in terms of rewards, perhaps Joe deserves first consideration, since Winnie has already licked a bushel of lollipops. Joe needs to be compensated for the sorry hand he was dealt the first time around.

3. The stratification of society is resented by the people in the lower strata. Even such trifling distinctions as those between master and slave, or between commissar and worker, are only grudgingly endured, if at all. The chance of the masses holding still for the vastly greater split between mortal

and immortal is nil. The elite have a fairly simple choice: share immortality, or be torn limb from limb.

4. The benefits to all of society resulting from the long view depend on all of society sharing this view. The Golden Rule must know nothing of class or caste.

In short, the freezer program must embrace us all, with exceptions for minorities who voluntarily reject it. There will be a preliminary slipping and clashing of gears, but this must be kept to a minimum if the world's works are not to fall apart.

There is a saying: If the rich could hire people to die for them, the poor would make a good living. But our poor are not docile enough to be content with this kind of "living"; they will not build freezers for the rich, and then lie down themselves in slimy graves. Hence there must be no excessive time lag between the private, pioneer programs and public, mass programs.

Beginning of the Freezer Era 1964?

In a sense, the freezer era has already begun, since conscious, purposeful activity in this direction is under way. There already exist, in late 1963, at least three organizations dedicated to furtherance of the freezer program, at least two of them legally incorporated. Many others can be expected to spring up shortly.

The freezer program is already a plank in the political platform of a congressional candidate, who now has the distinction of promising more than any other politician in history.

The grass-roots readiness, as indicated by my conversations and correspondence, is unmistakable - and oddly enough, it seems to have little or no relation to status or education; some poorly educated people are affirmative for the wrong reasons, and some scientists are against the program for emotional reasons. (There is wry humor in the predicament of

any cryobiologists who may not favor the program; the poor devils will have to hope for their own failure!)

The first human may be frozen before the end of 1964, that is, within a few months of publication of this book. (Possibly a few wealthy people have been quietly frozen already!) Thereafter, events will gather speed, and our medical, financial, and political leaders may find themselves in the fix of Robespierre during the French Revolution. Robespierre, the story goes, was relaxing in a cafe with a friend when a howling mob went racing by. He jumped up and ran for the door. His friend called, "What's the matter? Where are they going?" Robespierre flung back: "I don't know where they're going, but I've got to get in front. I'm their leader!"

Hopefully, the freezer advocates will not have

the less appetizing characteristics of a revolutionary rabble, but they will be just as determined. After all, the prize is Life - and not just more of the life we know, but a wider and deeper life of springtime growth, a grander and more glorious life unfolding in shapes, colors, and textures we can yet but dimly sense. Large numbers of Americans and Europeans will soon come not only to perceive but to feel the vastness and the grandeur of the prize, and to understand that all other prizes, all previous goals, are secondary. Their demands cannot be long ignored.

These demands will be of two general kinds, and will be aimed, among others, at physicians, biologists, morticians, insurance men, bankers, legislators, and lawyers.

First, make available routine and regularly updated procedures for freezing those now dying, making the most of current means.

Second, provide massive scientific and financial support for accelerated research in non-damaging freezing methods, as well as for a complete range of ancillary facilities.

In 1964, there will probably be little or nothing available in the form of institutional help or standardized procedures, and courageous individuals will have to take matters into their own hands. Then, for the first time in the history of the world, it will be *au revoir* but not *Good-bye*.

The End

Robert Ettinger's vision of an extended life span for all humanity is being continued today by the Cryonics Institute, a non-profit corporation dedicated to furthering the cause of saving lives through public education, scientific research, and human cryopreservation.

The Cryonics Institute was founded by Robert Ettinger in 1976 and has carried on his work for over a quarter of a century. As President, Vice President, and Director, Robert Ettinger has given much of his life to developing the Cryonics Institute into one of the premier providers of human and DNA cryopreservation services today.

Information about the Cryonics Institute, its services, its people, and its goals can be found by visiting the Cryonics Institute web site at: cryonics.org.

And if you've read and enjoyed this free edition of one of the most significant and lasting books of the 20th century, please consider saying thanks by helping the Cryonics Institute or the Immortalist Society with a donation. Because the future of cryonics depends on people like you.

