

WHY ILL PEOPLE ATTACK

Though Ill People seem to hunger for human flesh, they don't seem to require it.

Our brains tell us not to eat other humans. We feel revolted by the idea. There is a part of our brain that makes us feel revolted by human flesh. This part of their brain is damaged by the illness and this has changed their food preferences.

They now prefer eating living things and are revolted by dead things. Most of what we eat is dead or killed just before we eat it.

Then – Why do they attack?

When we feel under attack, we are like any other animal that can be prey as well as predator, we hide and stay very quiet. This response is organised by the same general part of our brain that manages our eating: it manages hunting and being hunted.

When we can't hide, we run, screaming. When we are trapped by a predator, we fight to save ourselves and others. Flight – and fight.

The Ill People's brain damage makes them focused on hunting and being hunted. When they feel under attack, Hiding and Flight are shorted out. They move into Fight very swiftly.

DEALING WITH BITES

Bites from newly ill people carry the infection. Probability of infection after a bite from an affected patient is high.

Some people are immune to the Lazarus Pathogen and some people will be able to recover. However, the numbers are small.

Do not assume you or your loved one is immune or will recover fully.

Decide what to do NOW

As a first step, destroy your Donor Card. Once you are bitten, your organs will be contaminated. Decide what you want others to do if you are bitten.

You can chose to ask for First Aid and ignore the likely infection. This puts others in danger.

You can choose a way to die, but it must be quick, completely destroying your brain.

First Aid

Always carry a light and well equipped First Aid Kit. It is important to know how to deal with minor injuries, including bites.

Many more Well People will be injured by accident than by Ill People and you are probably more likely to be bitten by a frightened animal than an Ill Person.

TIPS

- Hydrogen Peroxide (Hair Bleach) and an anti-septic cream are useful for cleaning bites or wounds
- Don't cover bites – of any kind
- Petroleum Jelly (Vaseline) is useful for burns and grazes
- Household Bleach can be used (carefully) to sterilise water for drinking, washing teeth and wounds
- Matches are useful to flame tweezers and needles

SURVIVAL CHECKLIST

- | | |
|--|--------------------------|
| First Aid Supplies | <input type="checkbox"/> |
| Medical Supplies
<small>(pain relievers, antacids, vitamins, prescription medication)</small> | <input type="checkbox"/> |
| Sanitation and Hygiene Supplies | <input type="checkbox"/> |
| Equipment and Tools | <input type="checkbox"/> |
| Food and Water | <input type="checkbox"/> |
| Clothes and Bedding Supplies | <input type="checkbox"/> |
| Documents and Keys | <input type="checkbox"/> |



PUBLIC SAFETY NOTICE

LAZARUS PATHOGEN (LP)



THE LAZARUS PATHOGEN

WHAT DOES IT LOOK LIKE?

We believe LP begins like a cold or flu. Some or all of the following are common:

- headache and dizziness, aversion to light
- muscle aches and/or chills, aversion to draughts
- irritability anxiety and/or restlessness and/or problems sleeping
- sore throat, possibly pain on swallowing
- lack of appetite, possibly aversion to drinking
- vomiting, possibly with some blood
- bleeding into the skin, from mouth, ear or nose
- a high temperature of 38°C (100.4°F) or above
- extreme tiredness

These symptoms can be mild at first but they **quickly become serious:**

- higher temperature with excessive sweating
- widespread signs of bleeding under the skin, mouth, eyes, or ears
- fearful reaction to light and/or draughts
- severe throat spasms, especially on swallowing leading to a fear of drinking (hydrophobia)
- excessive production of saliva (drooling), which might be blood stained
- increased agitation
- aggressive behaviour, such as thrashing out or biting
- hallucinations
- delusions – believing things that are obviously untrue
- the hair on their skin stands up
- a sustained erection (in men)
- gradual of loss of pain sensation, starting in hands and feet, which might get injured
- increasing clumsiness in movement

The person might go into **shock**, show further signs of nervous system malfunction, **coma**, **delirium**, and **seizures**. **Death is common.**

Just like with the flu, you can catch LP

- by direct contact with infected patients displaying symptoms of LP
- by exchange of bodily fluids with infected person's saliva or blood
- or by their **bite**

Around half of the affected persons will also experience pain and a tingling sensation at the bite site.

The closer the site of infection is to your brain, the quicker infection takes hold. You will get ill faster from a bite to your face, head or neck than one on your arm or leg.

WARNING

Even if people do not seem to get the flu, they might show these symptoms

- gradual of loss of pain sensation, starting in hands and feet, which might get injured
- severe infections in the injured places
- difficulties with memory and problem-solving
- outburst of anger when you experience these difficulties
- strange intrusive thoughts and impulses to bite or eat other humans
- increasing clumsiness in movement (like when you are drunk)

**HAVE YOU BEEN
CLOSE TO SOMEONE
WHO HAS HAD ANY
OF THESE
SYMPTOMS?
THEY ARE
INFECTIOUS!**

**LP
LAZARUS PATHOGEN
INFECTION**

**DON'T GET
BITTEN!**



THIS IS A PUBLIC SAFETY NOTICE

HAVE YOU BEEN CLOSE TO SOMEONE WHO HAS HAD ANY OF THESE SYMPTOMS?

Symptoms of Lazarus Pathogen (LP) infection are similar to the common cold or flu:

- headache and sore throat
- irritability and/or anxiety and restlessness and/or problems sleeping
- lack of appetite and/or vomiting, possibly with blood
- muscle aches and/or chills
- a high temperature of 38°C (100.4°F) or above
- extreme tiredness
- bleeding under the skin or from eyes, mouth, or nose
- bursts of aggressive behaviour, such as thrashing out or biting

Just like with the flu, you can catch LP

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Around half of the affected persons will also experience pain and a tingling sensation at the bite site.

The closer the site of infection is to your brain, the quicker infection takes hold. You will get ill faster from a bite to your face, head or neck than one on your arm or leg.

THEY ARE INFECTIOUS!

LP: LAZARUS PATHOGEN INFECTION

DON'T GET BITTEN!

Circular to all Doctors, Paramedics, Nurses and First Aiders

LAZARUS PATHOGEN (LP) BIOSAFETY LEVEL 4

This is an exotic agent posing a high risk of life-threatening disease.
There is, at present, no vaccine or therapy.

Essential Life-Saving Precautions – please read LP IS CONTAGIOUS

It is spread by bodily fluids, mainly saliva. It spreads from person to person in the same way that colds and flu spread: directly by droplet spray or by contamination of surfaces or medical equipment.

Biohazard

LP can infect Lab staff handling blood samples if in contact with broken skin.

Dispose of sharps very carefully.

Report needle-stick injury immediately.

Calls to Patients

If Lazarus Pathogen Illness (LPI) is suspected in a patient who is still at home the patient should **NOT** be admitted to hospital, even if critically ill.

NO blood samples must be sent to the laboratory until the situation has been assessed.

The On-Call Infectious Diseases Consultant must be contacted **straight away** and must visit the patient **at their home**.

If Lazarus Pathogen is suspected in a patient **already in hospital**, they should be taken straight to a negative-pressure side room.

The On-Call Infectious Diseases Consultant and Consultant Medical Microbiologist must be contacted **straight away**.

Personal Safety

Do not attract the interest of people already affected by LP. Use agreed hand signals and maintain silence at all times.

Before leaving your station

Take standard Biohazard Precautions

Wear your Biohazard suit where applicable

– this does not protect you from bites

When approaching a patient

Ensure you have room to defend yourself and a clear escape route

Ensure the patient cannot grasp your suit firmly enough to trap you

EDINA

Edinburgh Disease & Infection Nesting Agency



EDINA GUIDANCE ON ETHICAL RESEARCH

relating particularly to

Persons Affected by Lazarus Pathogen (PALPs)

To be read in conjunction with:

1. The Research and Ethics Guidebook: a resource for scientists
www.ethicsguidebook.ac.uk/The-adults-with-Incapacity
2. Adults with Incapacity (Scotland) Act 2000 (**Part 5**)
www.legislation.gov.uk/2000/4/contents
3. AWI (Scotland) Act 2000: Code of Practice (3rd Ed):
For Practitioners Authorised to Carry Out Medical Treatment or Research
Under Part 5 of the Act
www.scotland.gov.uk/Publications/2010/10/20153801/9
4. Mental Capacity Act 2005 (England & Wales)
www.legislation.gov.uk/ukpga/2005/9/content
5. Mental Capacity Act 2005 Code of Practice (England & Wales) **Ch 9 Sections 31-35**
www.justice.gov.uk/protectingthevulnerable/mental-capacity-act
6. National Research Ethics Service (NRES)
www.nres.nhs.uk

The Scottish and English Acts take a similar position on research with adults who lack the capacity to consent to the procedures they are subjected to. In both jurisdictions, the NRES ethics committee must vet all research proposals to ensure incapacitated adults are not abused or exploited.

They check that the research

- will bring new and necessary knowledge
- cannot be carried out with adults able to consent
- is aimed at benefitting the incapacitated adult directly or people like them
- is not being done on incapacitated adults because their inability to consent is convenient
- is not unduly risky or uncomfortable
 - or, if it is, that the risk and/or discomfort is warranted
 - and the adult's opinion regarding his discomfort is respected

They check, also, that

- the incapacitated adult is not objecting to their involvement in the research
- the views of those closest to the incapacitated adult are taken into account

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Case law has limited the absolute nature of the Acts by applying conditions in certain situations, which are deemed to serve the incapacitated adult's best interests beyond medical best interests.

Example 1: it allows incapacitated adults to be used in research, even uncomfortable research, which does not benefit them medically but does benefit a member of their circle. This is said to benefit them in that the members of their circle will be better disposed to them as a result.

Example 2: investigations that would normally be considered research can be carried out where the results are needed urgently for the immediate management of the service charged with their care and there is no time to go through the usual approval process (i.e. urgent service reasons)

We believe this last example is relevant to us.

Current Situation

Our patients are affected by Lazarus Pathogen (PALPs).

The justification of the PALP cull is The Principle of Self Defence, on the grounds that:

- harm from them is both highly probable and severe
- those harms are Flesh Eating and Infection-spreading

We submit that the basis for this justification needs to be more fully investigated. However, there are issues relating to the Obtaining of Capacious Consent and whether to proceed without it.

Assumption of Capacity

Normally, it is assumed that all patients have capacity unless it is clearly evident that they do not.

Evidence is obtained in the course of an interview – in this case interview is not possible. Their brain function appears to be impaired by the pathogen's disease process.

Possible Prejudice

Our understanding of the PALPs' behaviour is highly coloured by the intensity of the current outbreak and by our understanding of fictional Zombie brain damage and undead status.

Inferred doubt

While we have, as yet, no direct evidence of the nature and degree of the PALPs' brain damage, the difficulty in establishing rapport and the physical signs provide some basic information. We can develop a theory or theories based on our observations to date.

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As a group, we believe:

- our patients have never been dead
- they do have a condition that impairs them to the extent that they function quite differently from their former human selves
- we are concerned that this change is irrevocable

These observations suggest that PALPs, following the acute phase of illness, are usually incapacitated.

Accordingly, it is unlikely that the process of obtaining consent to examine the PALPs and investigate their condition in the usual way will be possible in the first instance.

Assumption of Incapacity

It follows that, for us to gain necessary information, we must proceed without consent until such time when it will be possible to explain the nature and risks involved in our examinations and investigations to the PALPs and request their consent. At that time, should consent be refused, the wishes of the PALP concerned will be respected.

Compliance with the Law

The Assumption of Incapacity invokes the Adults With Incapacity (Scotland) Act 2000 Examination and investigation are both clearly in the best interest of the PALPs Research into the Biting is less clearly so, although without it the PALPs are condemned to cull.

All NRES Ethics Committees are suspended, so we cannot make a submission to one
We are currently under Martial Law – so the AWI 2000 is technically suspended
We have made our submission to EDINA and it has been accepted on the condition that we proceed in accordance with what we believe the NRES Ethics Committee would require.

We have done all in our power to comply with this condition.
We accept routine and random checks on our compliance.
We are prepared to make a submission to a NRES Ethics Committee at the first opportunity and will accept any modifications they suggest whenever we receive them.

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