KAPHAWKS DISEASE First Episode of fear

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KapHawks Disease. A deadly disease plaguing the world of Wealth. Where the days would start on a Yacht and end with a slow death. Where the death bed is visited every day without one's knowledge of it being a DEATH bed. This disease has a brief history, as there's only been the records of patient zero and few of their family members. Yet, it is certain, this disease is *the* deadliest disease humankind will face.

The reason is, in its combination of ailments and tricks that have arisen from the old-age nature of the pathogen. This pathogen originated in the Arctic, from an air bubble trapped in the Millions of years old Ice pocket. Upon melting, this disease became transmissible in the air and started looking for a subordinate. That's when it found patient zero, which will be discussed later. The Etymology of this disease is well known but not the full symptomatology. The term, KapHawks, was coined by Dr. Hridey Kapoor who named the disease after himself much like Parkinson's disease (Dictionary, 2022). Since every cell came from a pre-existing cell, and every species developed from one, this pathogen comes from a very new type of species of pathogen called the Mycobacterium Gastrorrhagia. The origin of "mycobacterium" comes from the Greek words "mykes" and "bakterion," which mean "fungus" and "little staff" respectively. The word was first used in the late 19th century to refer to a group of bacteria that were characterized by their slow growth and their ability to form fungi-like colonies. These bacteria were later found to be the causative agents of several diseases, including tuberculosis and leprosy. The word "mycobacterium" is now used to refer to any member of this group of bacteria (Dictionary, 2022). While Gastreovactin's Gastreo- prefix refers to the stomach and the -rrhagia suffix refers to the excessive flow or leakage of blood.

As species and cells were developing millions of years ago, this pathogen was produced but never evolved due to it being stuck in the arctic ice. But now, this disease has escaped because of global warming. The melting of ice caps let it out and now this disease attacks the preliminary and the simplest mechanisms that build up an organism, its genome and the gut environment.

We all know that there are good and bad bacteria; the bad bacterial pathogens cause an imbalance in our gut environment and overall health (Patangia et al., 2022). While good bacteria promote the synthesis of vitamins, prevent colonization of pathogenic bacteria, and help create antibodies against them. To kill and prevent pathogenic bacteria, good bacteria can be combined with the help of antibiotics but there is a risk, antibiotic resistance (Princess et al., 2020). Bad bacteria can be resistant to antibiotics, over time, and antibiotics are even shown to kill our good gut bacteria (Team and Patangia et al., 2022). Good bacteria have been with us for thousands of years, but due to KapHawks disease, it is distancing us. This disease makes the good bacteria resistant to humans, and slowly lets any other pathogenic bacteria take over. Yet, this is not the worst part; this disease's transmissibility is very high, from aerosols, to being a part of the genome (germ-line cells) and causes the future generation to also develop this disease, in-womb. Causing death before birth.

This disease promotes all sorts of problems, from fever, diarrhea, rashes, to internal ulcers and bloody bowels. Since its plan of attack is making the body produce an unknown toxin which kills all the good bacteria, thus allowing space for every type of pathogenic bacteria to invade and proliferate within the microbiome of our gut. Causing many different symptoms/ailments mentioned above.

To document KapHawks disease, I will be showcasing and narrating the Doctor-Patient interaction of Patient Zero (Ms. Ulkabatericia) via email, her lab reports and personal records, and the death record of the first month after Patient zero. This will help get you a basis of the disease, how difficult it was to diagnose this disease, and how it was accomplished due to the lab testing and knowledge of Dr. Kapoor. This disease is still a big mystery but one

thing is sure, it has a lot of potential to kill everyone in this world by not giving them just a disease but several. Every time someone was diagnosed with more than one bacterial infection, they were also classified for this disease.

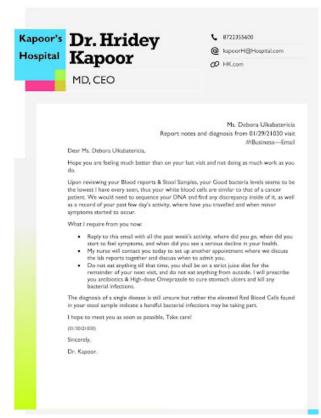


Figure 1. Report notes and diagnosis from a doctor visit.



Figure 2. A patient letter to the doctor with details regarding his symptoms and conditions.

All further notes will be spoken by the Narrator (Me):

No reply from Dr. Kapoor. They met the next day and, in their conversation, they discussed the reports further. Upon performing some antibody tests, they found that she has the Flu, Covid-19 (which seemed extinct), TB, and Tetanus.

What is shocking is that no one person has ever gotten these diseases all at once and still being able to function pseudo-normally without death. He classified her as a 'patient zero' and tried to isolate everyone that was in her contact, including himself. Luckily due to a spike in COVID-21029's cases, everyone was taking higher precautions than usual. Only her family was exposed to this disease, but they were yet to feel the symptoms. It takes around 10 days upon exposure to cause stomach ulcers and bloody bowels.

Dr. Kapoor found that on the day of exposure, you poop a lot, and this could be due to the good bacteria leaving your body as soon as possible and leaving the gut microbiome open for other harmful bacteria to take over. Then in the next few days, it's the accumulation period, where every type of bacteria that you get exposed to, through your food, will start to breed. Then upon the incubation period of that particular disease, the person's body starts to deteriorate.

Yet, one of the vital roles of good Bacteria, apart from killing off pathogenic bacteria, is to help digest and make crucial vitamins from the food engulfed. Ms. Ulkabatericia died within 3 days of that visit, not due to the pathogen (still shocking) but due to lack of the ability to synthesize and absorb vitamins. Supplements were given to her right after her visit but thereafter, all lab reports showed lack of Red Blood Cells, and vitamins & minerals present. Dr. Kapoor, with a grave expression, had to call euthanize Ms. Ulkabatericia as the suffering was beyond imaginable for a doctor as well. Her bedsheets were covered in blood and urine, her stomach had ulcers inside which the stomach acid was tearing apart internal stomach lining. Her husband and a 5-year-old son could not meet her, even virtually because they were also exposed to the virus, and started to have common ailments like diarrhea and fevers accompanied with chills. After 8 days, they also died of various bacterial infections but the most prominent of them all was TB.

Since TB is such a long lived pathogen, it is said to have multiplied and taken over the stomach. While people think that TB is a predominately respiratory disease, it is not, it is an all body disease, it can spread in any location of the body. And it finds a way in the stomach to multiply and grow, then into the bloodstream, as the ulcers develop and burst.

This many pathogens present at once, and the ability of this unknown pathogen transferring through aerosols of our breath is said to be its number one source of transmissibility. Since, Dr. Kapoor was the one to be able to work on this disease and make profound precautionary steps, the unknown disease is now named KapHawks Disease (KHD). He has made a catalog for all the deaths he has seen in a month period.

Table 1: Admission, Exposure, symptoms, Pathogens, and Death Date of KHD. (Kapoor, 21030)

¥	Ag	Patient Name 💌	Date Admitte *	Date Expose 💌	Symptoms -	Pathogens tested for 💌	Death Dat
1	35	Debora Ulkabatrecia	01/31/21030	01/20/21030	Fever, Chills, Diarrhea, Bloody Bowels, Malnutrition, Ulcers	TB, Flu, COVID-19, Tetanus	02/01/21030
2	5	Johnah Ulkabatrecia	02/11/21030	01/22/21030	Mainutrition, Diarrhea, Fever, Chills, Ulcers	TB, Flu, COVID-19, Tetanus	02/12/21030
3	40	Mike Ulkabatrecia	02/11/21030	01/22/21030	Diarrhea, Ulcers, Fever, Chills	TB, COVID-19	02/13/21030
4	42	Leandro Bonilla	02/14/21030	01/25/21030	Diarrhea, Ulcers, Fever, Chills, Bloody Bowels	TB, Tetanus	02/17/21030
5	3	Heidi Rojas	02/14/21030	01/26/21030	Diarrhea, Ulcers, Fever, Chills	Tetanus, COVID-19, E.Coli	02/17/21030
6	38	Araceli Gordon	02/20/21030	01/27/21030	Diarrhea, Ulcers, Fever, Chills	Staphalococcus	02/22/21030
7	17	Greta Boyer	02/21/21030	01/27/21030	Diarrhea, Ulcers, Fever, Chills, Bloody Bowels, Malnutrition	TB, COVID-19	02/22/21030
8	16	Alia Fuentes	02/21/21030	01/27/21030	Diarrhea, Ulcers, Fever, Chills, Bloody Bowels	TB, Tetanus, COVID-19	02/22/21030
9	36	Valentino Long	02/22/21030	02/01/21030	Diarrhea, Ulcers, Fever, Chills	TB	02/22/21030
10	64	Jakayla Clark	02/22/21030	02/01/21030	Diarrhea, Ulcers, Fever, Chills, Bloody Bowels	TB	02/22/21030
11	3	Johan Schneider	02/22/21030	02/01/21030	Diarrhea, Ulcers, Fever, Chills	TB	02/25/21030
12	63	James Dominguez	02/23/21030	02/13/21030	Diarrhea, Ulcers, Fever, Chills	TB	02/25/21030
13	3	Jayleen Atkinson	02/23/21030	02/13/21030	Diarrhea, Ulcers, Fever, Chills	TB	02/25/21030
14	32	Krystal Waters	02/23/21030	02/14/21030	Diarrhea, Ulcers, Fever, Chills, Bloody Bowels	TB, COVID-19	02/25/21030
15	47	Natalya Pugh	02/31/21030	02/14/21030	Diarrhea, Ulcers, Fever, Chills	TB, Tetanus	03/05/21030

Table 1 curated by Dr. Kapoor is yet to be published by him and his hospital. Regardless, this table can still provide insights into some common observatory evaluations of the KapHawks Disease. On average, everyone is getting exposed and being hospitalized/admitted after 12.5 days of gap in between. This is a very bad rate as this means they are waiting to be at their worst before they get a proper treatment. Second, the days in between death date and date admitted, on average is around 2 days. Meaning all the patients admitted are so critical that they die shortly after admission. Most patients suffer

from malnutrition because diarrhea makes them more vulnerable to it.

In conclusion, the correct pathogen has not been identified, but it is believed that this pathogen kills off the good gut bacteria present, thus promoting malnutrition and diarrhea to further stress the body, while other pathogens attach the body, and take it hostage.

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