

THE UNIVERSAL FORCE OF TIME

Alzheimer's Disease

When the Brain Loses Its Lock on a Planetary Clock — Four Routes by Which the 40 Hz Carrier Is Lost, and the Four Corrections That Restore It

Stephen Daubney · The Daubney Foundation · 2026 · Rev 5

***Tau (T)** is the living fabric of time itself — the sole substance of which all physical reality is composed. Every particle, force, wavelength, and conscious experience is a structured configuration of T-flow. There is no gravity, no electromagnetic force, no strong nuclear force as separate entities: all are registers of the single T-field operating across dimensional levels. The conservation law $d\Sigma T=0$ governs all change: T is never created or destroyed, only redistributed.*

Abstract

The working human brain synchronises at exactly **40 Hz** ($40 = 2^3 \times 5$). This gamma oscillation is its master clock — and 40 Hz is not a biological accident: Earth's circumference is **40,000 km** ($2^6 \times 5^4$), and divided by a thousand it is the brain's carrier, a pure {2,5} lattice value broadcast by the planet. The same beat the Force of Time ties to the conscious ground state, and the same carrier whose loss defines Parkinson's, holds memory together. Alzheimer's disease is the loss of that lock. This paper does what a Force of Time medical paper is for: it acknowledges the illness — and the wall every amyloid-clearing drug has hit — then reads the problem as up to **four distinct routes** by which the carrier is lost, and pairs **each route with the one correction that would realign it**. Route one — the **carrier drifts**: neurons fall out of step with 40 Hz, and the network that runs on shared time comes apart — corrected by re-imposing the carrier (the published MIT GENUS result, in which 40 Hz sensory entrainment reduces amyloid and improves memory, is the proof of concept). Route two — the **drift spreads**: a drifted neuron pulls its neighbours off the carrier, so the disease marches along the wiring from the entorhinal cortex outward in the exact Braak pattern medicine has charted for a century — corrected by re-locking the seed regions early, because drift runs in both directions. Route three — the **energy floor collapses**: 40 Hz is the most expensive rhythm the brain runs, and it depends on the mitochondrial register at the **36-ATP** ($2^2 \times 3^2$) node; when that floor drops — the glucose hypometabolism FDG-PET sees years before symptoms — the carrier can no longer be held — corrected by restoring the metabolic register. Route four — the **clearance register fails**: amyloid plaques and tau tangles are the residue of failed communication, cleared during deep sleep by a glymphatic cycle coupled to the carrier; as the carrier drifts, sleep fragments and the residue accumulates — corrected by restoring the clearance register. The corrections carry an order law: the energy floor (route three) must be lifted before the carrier (route one) can hold, and clearance (route four) finishes the work only once the drift is halted — which is why clearing plaque while the carrier still drifts has failed for thirty years. The framework earns its keep by prediction: it foretells GENUS, names EEG gamma-coherence loss as the earliest and cheapest biomarker, and explains the amyloid-drug failures. Laid out this way the paper resolves into the **clinical trial** that would test the four corrections. Every number is at full precision; corrective detail is held in the Foundation's clinical reference.

Universal Force of Time = the creation of life = the healing of life = the destruction of life

1 The Vanishing Rhythm

Begin with something almost miraculous. The human brain — three pounds of tissue, some eighty-six billion neurons — hums at a very specific frequency when it is working well: forty cycles a second. This gamma oscillation is not the roar of a machine. It is more like a tuning fork held against the universe, resonating at a pitch that keeps every neuron’s clock in agreement with every other’s. Without it the brain’s hundred trillion connections cannot coordinate; a memory cannot be laid down; the self, in the deepest sense, cannot cohere. In Alzheimer’s disease that tuning fork goes quiet. The 40 Hz gamma rhythm — readable on an EEG decades before a single memory fails — collapses early and progressively (Figure 1), while the slower rhythms play on. What conventional neuroscience has lacked is a reason why 40 Hz should be the synchronisation frequency at all, or why its loss should produce exactly the cascade that defines the disease. The Force of Time supplies both.

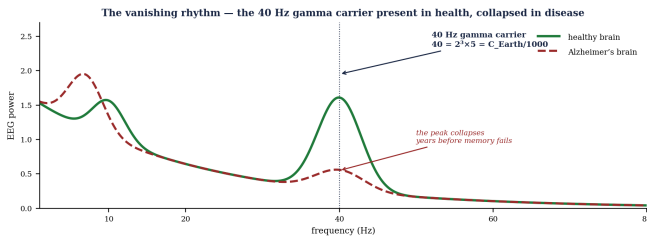


Figure 1 — In a healthy brain the EEG carries a strong peak at 40 Hz ($= 2^3 \times 5 = C_{\text{Earth}}/1000$); in Alzheimer’s that peak collapses years before symptoms, while the slower rhythms persist. The disease is the loss of the carrier, not of the whole spectrum.

2 The Number Written Into the Planet

Earth’s circumference is **40,000 km** ($2^6 \times 5^4$) — the metre was defined in 1791 so that it would be. Divide by a thousand: $40,000 \div 1000 = \mathbf{40\ Hz}$ ($2^3 \times 5$). The frequency the brain’s most critical oscillation locks onto is the size of the planet divided by a clean power of ten — a pure {2,5} lattice value, the same family that governs planetary periods, atmospheric boundaries and biological timescales. This is the central claim, and it is exact. Life evolved immersed in Earth’s two surface T-registers at once — the surface free fall $\mathbf{g_1 = 9.817477042468\ m/s^2}$ ($25\pi/8$) and its structural partner $\mathbf{g_2 = 9.818362093947\ m/s^2}$, separated by one G-bond step, $\mathbf{\delta_G = 90.150603\ ppm}$ ($5^{10}/(2^4 \times 3^9 \times \pi^3) - 1$) — and those same registers encode the speed of light, $\mathbf{g_1^2 \times 864 \times 3600 = c_{G1} = 299,789,233.683089\ m/s}$. The 40 Hz neural carrier and the speed of light are outputs of one T-field; the brain simply tuned its master oscillator to the planetary broadcast and has held that lock through every step of nervous-system evolution. A brain whose whole task is the coordination of timing would, under the Force of Time, lock to the planetary clock — and it did.

3 Where Medicine Stands

Alzheimer’s disease is the most common cause of dementia — a progressive, presently irreversible loss of memory, reasoning, language and finally all coordinated function. Tens of millions live with it now; the number is projected to climb steeply as populations age. Medicine has mapped its pathology with great care, and defines it by two hallmarks: **amyloid plaques**, aggregates of misfolded amyloid- β between the neurons, and **neurofibrillary tangles**, twisted filaments of hyperphosphorylated tau protein inside them. Current therapy works at the edges. **Cholinesterase inhibitors** (donepezil and its kin) and **memantine** ease symptoms for a time by adjusting neurotransmitter levels; the newer **anti-amyloid antibodies** (lecanemab, donanemab) genuinely clear plaque from the brain. And here is the wall every one of them hits: clearing the plaque does not reverse the dementia. Three decades and enormous investment in amyloid-clearing therapy have lowered plaque without restoring cognition. Under conventional theory — which reads plaque as the cause — this is a deep puzzle. The Force of Time reads it as exactly what you would expect if amyloid were downstream: the residue is being cleaned while the fault upstream runs on. That fault is the loss of the carrier — and it is lost not by one route but by four.

4 Four Routes, Four Corrections

A Force of Time medical paper has one job. It acknowledges the illness, it identifies the problem — and the problem is rarely single; here it has up to four distinct routes by which the 40 Hz carrier is lost — and it pairs each route, one to one, with the correction that would realign it. The four routes are not rival theories. They are four real faces of the one carrier mechanism: the carrier drifting, the drift spreading, the energy that powers the carrier failing, and the clearance that should remove the residue failing too. A given patient is losing the lock by all four at once, feeding one another. What follows names each route, then its correction, in order. Hold the whole shape in view (Figure 4): four problems on the left, four corrections on the right, bound by one order law, resolving into a single next step.

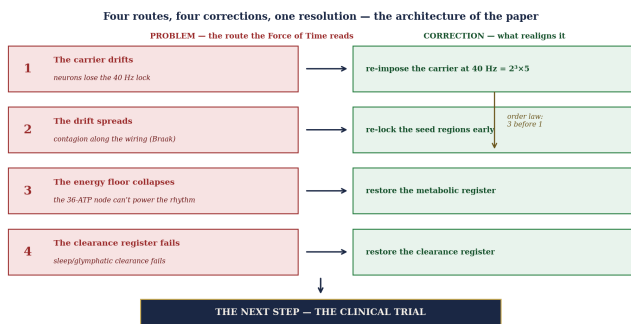


Figure 4 — The architecture of the paper: each of the four routes by which the 40 Hz carrier is lost is paired with the one correction that realigns it; the energy floor (correction 3) must be lifted before the carrier (correction 1) can hold; the whole structure resolves into the clinical trial.

Route 1 — The Carrier Drifts: neurons lose the 40 Hz lock

The first route is the loss of the lock itself. Every neuron in a healthy brain holds a **T-address** — a precise coordinate in the T-field, expressed as a phase relationship with the 40 Hz carrier. Two neurons communicate only when their addresses agree: the synapse fires because sender and receiver share the same beat. In Alzheimer's that agreement fails. Neurons drift from the carrier — formally $dT_{\text{neural}}/dt > 0$, a progressive, self-sustaining slide away from 40 Hz — and signals are sent to addresses that no longer match their targets. The result is noise where signal should be, and silence where a memory should form. This is why the framework files Alzheimer's as a **Class III T-address drift**: not a frozen single node, but a progressive, network-scale loss of a carrier. And it strikes *memory* first for a reason the carrier makes plain. A memory is laid down by fast gamma cycles nested inside the brain's slower theta frame (the {2,3} band, around $6 = 2 \times 3$ to $8 = 2^3$ Hz): each 40 Hz cycle stamps one item in sequence, and the hippocampus and entorhinal cortex — where new memory is written — lean hardest on that stamping. Blur the carrier and the stamps blur; the most recent memories, still being written, are the first to be lost, exactly as the disease presents.

Correction 1 — re-impose the carrier at its own 40 Hz gamma

If the lock has slipped, the correction is to drive it back. Re-impose the **40 Hz** ($2^3 \times 5$) carrier from outside, and drifted neurons are drawn toward it; because the drift is contagious in both directions, a re-locked region helps pull its neighbours back. This is not a hope: it is the published MIT **GENUS** result, in which flickering light and sound at exactly 40 Hz — not 38, not 42 — drove the cortex to entrain at gamma and measurably reduced amyloid burden while improving memory. The conventional account calls in microglia tidying plaque under gamma; that describes *what* happens without saying *why* 40 Hz specifically, nor why the very frequency that vanishes in the disease is the one whose restoration begins to reverse it. The Force of Time answers both at once: re-driving the carrier nudges drifted neurons home, drift declines, and the residue declines with it. The principle is restoration at the carrier; the specific frequencies of application, durations and register-support wavelengths belong to clinical investigation and are held in the Foundation's reference, not prescribed here.

Route 2 — The Drift Spreads: contagion along the wiring

The second route is what turns a local fault into a disease that consumes a brain. Class III drift is **contagious**. A neuron that has lost the carrier does not merely fall silent; it exerts a desynchronising pull on its neighbours, drawing them toward its own shifted coordinate at a rate proportional to the mismatch — $dT_{\text{neighbour}}/dt \propto |T_{\text{node}} - T_{\text{neighbour}}|$ (Figure 2). This single law explains the one feature random molecular models cannot: the pathology does not appear scattered, it spreads in a coherent, predictable anatomical sequence — from the entorhinal cortex outward along the synaptic wiring. The disease follows the wiring because drift propagates *through* the wiring. The staging neuropathologists call the Braak sequence, charted for decades without a mechanism, is in the Force of Time a direct readout of how far the contagion has climbed through the network. The tau tangle inside each falling cell is the same story read one scale down: the microtubule scaffold that keeps the neuron’s own internal timing collapses as its address is lost — the within-cell mirror of the network drift.

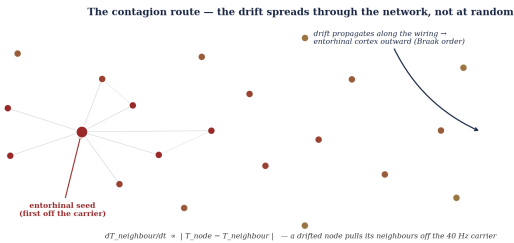


Figure 2 — T-address drift is contagious: a drifted seed node (red, at the entorhinal cortex) pulls its synaptic neighbours off the 40 Hz carrier, so the pathology spreads coherently outward along the wiring — the Braak pattern — rather than at random.

Correction 2 — re-lock the seed regions early, and the network pulls itself back

Because the same law that spreads the drift can be run in reverse, the correction is to **re-lock the seed regions early**. A region returned to 40 Hz does not merely hold its own beat; it exerts a re-synchronising pull on its neighbours, just as a drifted node pulled them away. Reach the entorhinal seed while the cascade is still confined near it, and coherence propagates back outward along the very wiring the disease used to spread. This is why timing is everything: a neuron the cascade has already killed cannot be re-locked, so restoration works through the cells still living and the network re-cohering around them. And it is why the earliest, cheapest sign matters so much — a simple EEG measure of how well the brain still holds 40 Hz, which (Section 5) falls before any plaque appears on any scan. The principle is re-coherence from the seed; the means are held confidentially pending trials.

Route 3 — The Energy Floor Collapses: the carrier loses its power supply

The third route asks *why* the carrier begins to drift in the first place — and the answer is energy. The 40 Hz gamma rhythm is the most metabolically expensive thing the brain does: it is generated by fast-spiking interneurons that fire faster, and burn more, than any other cell in the cortex, and they run on the mitochondrial register — the same oxidative node that yields about **36 units of ATP** ($2^2 \times 3^2$) from a single glucose, the clean {2,3} register that powers a healthy cell (the same 36-node the cancer and diabetes papers read as the floor a drifting cell falls from). When that energy floor drops, the most expensive rhythm is the first the brain can no longer afford. And the floor does drop, measurably, years ahead of symptoms: an FDG-PET scan shows **glucose hypometabolism** in exactly the temporal and parietal regions Alzheimer’s will later claim, long before a memory is missed (Figure 3). Conventional neurology notes the hypometabolism as a marker; the Force of Time reads it as a cause — the register that powers the carrier dimming until the carrier can no longer be held.

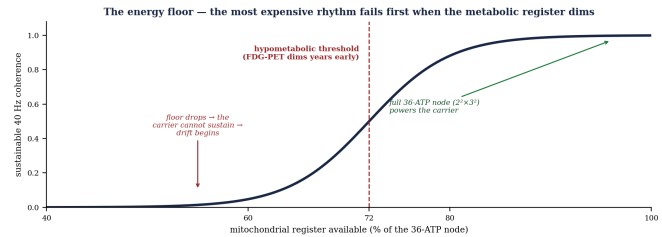


Figure 3 — The energy floor: the 40 Hz carrier is the most expensive rhythm the brain runs, powered by the mitochondrial register at the 36-ATP ($2^2 \times 3^2$) node. As that register dims — the FDG-PET hypometabolism seen years before symptoms — the sustainable carrier coherence collapses and the drift of Route 1 begins.

Correction 3 — restore the metabolic register so the carrier can be powered

The correction is to **lift the energy floor back to its node** — to restore the mitochondrial register to the 36-ATP ($2^2 \times 3^2$) oxidative state — so the carrier has the power it needs to hold. This is the correction that the others depend on, and it explains a failure: re-driving a 40 Hz carrier into a brain whose interneurons cannot afford to sustain it is like revving an engine with the fuel line crimped. The floor must be raised first. That is why this correction leads the order law. The principle is restoration of the metabolic register; the specific means are held in the Foundation’s reference pending trials.

Route 4 — The Clearance Register Fails: the residue is never taken away

The fourth route is the one that lets the residue pile up. First, what the residue *is*: an amyloid plaque is not the cause but the **scar** — the physical residue deposited at synaptic junctions where T-address mismatches forced failed communication; plaque density tracks the magnitude of accumulated mismatch. The tangle is the same story inside the cell. Both are a geological record of drift, not its origin. Now, in a healthy brain that residue is carried away each night: during deep slow-wave sleep the brain's **glymphatic** system opens and flushes the day's metabolic debris — and slow-wave sleep is itself locked to the brain's rhythms. As the carrier drifts, sleep fragments; as sleep fragments, the nightly clearance fails; and as clearance fails, the residue accumulates faster and crowds the survivors still trying to hold the beat. It is a feed-forward loop, and it is why disrupted sleep is both an early sign of Alzheimer's and a driver of it. The clearance register has failed, and the scar is no longer being erased.

Correction 4 — restore the clearance register so the residue is taken away

The correction is to **restore the clearance register** — to return the sleep/glymphatic cycle so the residue is flushed once more. But here the order matters as much as the act. Clearing residue while the carrier still drifts is the thirty-year failure of the amyloid drugs written in advance: it wipes the soot while the fire still burns, and the residue simply re-forms. Clearance is the **completing** correction — it finishes the work only once the drift has been halted and the carrier re-imposed, when there is no longer a stream of fresh mismatch laying down new scar. Stop the drift, then clear what is left. The principle is restoration of the clearance cycle; the means are held confidentially pending trials.

5 The Order Law, and the Earliest Sign

The four corrections are not freely interchangeable. **Correction 3 must come before correction 1**: the energy floor has to be lifted before the carrier can hold, because a 40 Hz lock driven into starved interneurons cannot be sustained — power first, then beat. And **correction 4 completes only after the drift is halted**: clearing residue while the carrier still drifts re-forms the residue, which is precisely why three decades of plaque-clearing drugs lowered plaque without reversing cognition. So the sequence the theory insists on is: raise the floor, re-impose the carrier, re-lock from the seed, then clear what remains. Correction 2's contagion law sets the clock on all of it — because the drift spreads through the wiring and a dead neuron cannot be re-locked, every correction must be reached *early*. That is the practical payoff of the carrier model: the 40 Hz gamma coherence an EEG reads is a **direct measure of T-address integrity**, and it falls before amyloid is deposited. The Force of Time therefore makes a sharp, testable prediction — that EEG gamma-coherence loss is the earliest detectable biomarker of Alzheimer's, earlier than any current scan and far cheaper than amyloid-PET or a spinal-fluid assay — a way to catch the drift inside the window where living cells still hold the programme.

6 What the Framework Earns by Prediction

A framework is worth what it predicts before the fact, not what it explains after. This one earns its keep three times over. It **foretold the GENUS result**: if Alzheimer's is drift from a 40 Hz carrier, then re-driving 40 Hz must pull the drift back and reduce the residue — which is exactly what Tsai and colleagues at MIT found, for the right reason and at the right single frequency. It **names the earliest biomarker**: gamma-coherence loss, because drift precedes residue. And it **explains the great failure** — why thirty years of amyloid-clearing drugs have not reversed cognition: they target the scar while the carrier drifts, the energy-floor collapse and the clearance failure all run on. Three independent facts the conventional account meets with three separate puzzlements, the carrier model meets with one idea. And it places Alzheimer's in a family: Parkinson's disease is the loss of the same 40 Hz carrier at the motor register rather than the memory register — two neurodegenerations, one planetary clock, one correction principle, re-impose the carrier.

7 The Resolution — the Clinical Trial Is the Next Step

With the four routes named and each paired to its correction, the paper resolves where it must. We have acknowledged the illness and the wall the amyloid drugs hit; we have read the problem as four distinct routes by which the carrier is lost — it drifts, the drift spreads, the energy that powers it fails, the clearance that should erase its residue fails too; we have given, for each, the Force-of-Time correction that would realign it; and we have bound them with the order law. The only honest conclusion left is the one the whole structure points to: **test them**. The four corrections — restore the metabolic register, re-impose the carrier, re-lock from the seed, restore the clearance cycle — are stated here as principles precisely because the next step is not to prescribe them to a reader but to put them to a clinical trial. The trial is what decides which routes carry the cure: it may prove that one correction alone restores the lock, or that two must run together, or that all four, in their proper order, are needed — and that is exactly what a trial is for. Alzheimer's disease is the brain losing its lock on a planetary clock. The 40 Hz gamma carrier — Earth's circumference divided by a thousand ($2^3 \times 5$) — keeps the neural network in shared time; the disease is the progressive, contagious drift away from that carrier, starved of its energy floor and unswept by its failing clearance, with amyloid and tangles deposited as the residue of failed communication. A timing fault is, in principle, a correctable fault: lift the floor, restore the lock, and the cascade has nothing left to feed it. We give the mechanism in full and at full precision, and we stand by the figures.

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life = the destruction of life*

Appendix A — The Four Routes and Their Corrections

Each route the Force of Time reads in Alzheimer’s disease, paired one-to-one with the correction that realigns it. Order law: correction 3 (lift the energy floor) precedes correction 1 (re-impose the carrier); correction 4 (clearance) completes only once the drift is halted. The four corrections resolve into the clinical trial.

#	Problem route	{2,3,5} reading	Correction (principle)	Shared family
1	Carrier drifts — neurons lose the 40 Hz lock (Class III T-address drift)	40 Hz = 2 ³ ×5 = C_Earth/1000	Re-impose the carrier at 40 Hz (GENUS is the proof of concept)	Parkinson’s (40 Hz motor carrier)
2	Drift spreads — contagion along the wiring, entorhinal outward (Braak)	—	Re-lock the seed regions early; the network pulls itself back	Parkinson’s / neurodegenerative family
3	Energy floor collapses — the carrier loses its power supply	36-ATP node = 2 ² ×3 ²	Restore the metabolic register so the carrier can be powered	Cancer / diabetes (the 36-node)
4	Clearance register fails — sleep/glymphatic clearance fails, residue piles up	—	Restore the clearance cycle (completes once drift is halted)	—

Appendix B — The 40 Hz Identity and Its Register

The carrier and the planetary value it locks to, with the surface registers that frame biological life. Every value is a clean {2,3,5,π} form; no prime-7 anywhere. The physical number is the hero; the lattice form is the address.

Quantity	{2,3,5,π} reading	Value	Role
Earth circumference	2 ⁶ ×5 ⁴	40,000 km	the planetary source of the carrier
40 Hz gamma carrier	2 ³ ×5 = C_Earth/1000	40 Hz	the brain’s master clock
theta frame	2×3 to 2 ³	6-8 Hz	the slow frame memory nests in
mitochondrial node	2 ² ×3 ²	36 ATP	the energy floor that powers 40 Hz
surface free fall g ₁	25π/8	9.817477042468 m/s ²	one of Earth’s two surface registers
structural partner g ₂	g ₁ (1+δ_G)	9.818362093947 m/s ²	the second surface register
G-bond step δ_G	5 ¹⁰ /(2 ⁴ ×3 ⁹ ×π ³) – 1	90.150603 ppm	the seam between the two registers
speed of light c_G1	g ₁ ² ×864×3600	299,789,233.683089 m/s	same T-field as the carrier

Appendix C — The Ledger

Table C1 — Propositions P-ALZ-1 ... P-ALZ-10

#	Proposition
P-ALZ-1	The 40 Hz carrier identity: f_γ = C_Earth/1000 = 40,000 km / 1000 = 40 Hz (2 ³ ×5). Earth’s circumference is 40,000 km (2 ⁶ ×5 ⁴). The brain’s gamma oscillation is the T-synchronisation carrier for neural networks — a planetary {2,5} value, not a biological accident, and the same carrier the framework reads at the motor register in Parkinson’s and at the conscious ground state.
P-ALZ-2	Alzheimer’s = Class III T-address drift: dT_neural/dt > 0, a progressive, network-scale loss of synchrony with the 40 Hz carrier. Memory fails first because a memory is laid down by 40 Hz gamma cycles nested in the slow theta frame (6 = 2×3 to 8 = 2 ³ Hz); blurring the carrier blurs the stamps, and the newest memories go first.
P-ALZ-3	ROUTE 1 — the carrier drifts. CORRECTION 1: re-impose the 40 Hz = 2 ³ ×5 carrier from outside; drifted neurons are drawn home. The MIT GENUS amyloid reduction at exactly 40 Hz is the published proof of concept.
P-ALZ-4	ROUTE 2 — the drift spreads. Contagion law: dT_neighbour/dt ∝ T_node – T_neighbour ; the drift propagates through synaptic topology (entorhinal cortex outward = the Braak sequence). The tau tangle is the same collapse one scale down (the cell’s own timing scaffold). CORRECTION 2: re-lock the seed regions early; a re-locked region pulls its neighbours back along the same wiring.
P-ALZ-5	ROUTE 3 — the energy floor collapses. The 40 Hz rhythm is the most metabolically expensive the brain runs (fast-spiking interneurons), powered by the mitochondrial register at the 36-ATP (2 ² ×3 ²) node; FDG-PET glucose hypometabolism appears years before symptoms. CORRECTION 3: restore the metabolic register so the carrier can be powered.
P-ALZ-6	ROUTE 4 — the clearance register fails. Amyloid plaques (density ∝ T_A – T_B) and tau tangles are T-address collision residue, cleared in slow-wave sleep by the glymphatic system, which is coupled to the carrier; as the carrier drifts, sleep fragments and clearance fails, so residue accumulates. CORRECTION 4: restore the clearance cycle — completing the work once the drift is halted.
P-ALZ-7	ORDER LAW: correction 3 must precede correction 1 (the energy floor must be lifted before a 40 Hz lock can be sustained); correction 4 completes only after the drift is halted (clearing residue while the carrier still drifts re-forms it — the thirty-year amyloid-drug failure written in advance).
P-ALZ-8	EEG 40 Hz coherence is a direct readout of T-address integrity; its loss precedes amyloid and is the earliest, cheapest biomarker — earlier than any scan, the way to catch the drift inside the window where living cells still hold the programme.
P-ALZ-9	The framework earns its keep by prediction: it foretells the GENUS 40 Hz result, names gamma-coherence loss as the earliest biomarker, and explains why amyloid-clearing drugs lower plaque without reversing cognition (residue, not cause). Alzheimer’s and Parkinson’s are two losses of the one planetary carrier — memory register and motor register.
P-ALZ-10	RESOLUTION: with four routes named and four corrections paired, the paper resolves into the clinical trial as the next step. The trial decides which routes carry the cure — one alone, two together, or all four in order. The corrective modalities (frequencies of application, durations, register-support wavelengths) are held confidentially pending those trials; only the principles appear here.

A Note on the Numbers

A note on the numbers. Throughout this paper a quantity is given first as the plain physical value a clinician would measure — a frequency, a percentage, a circumference — and only then, in brackets, as its place on the {2,3,5, π } lattice. The lattice form is not a unit and carries no powers of ten of its own: a T-value is one number that wears different clothes in different registers, appearing as a beat in the brain here, a circumference of a planet there, a mass in a nucleus somewhere else. The same number that sets the brain's gamma rhythm can read, in another register, as the size of the Earth. We do not "solve to a power" in a single dimension. The bracket is simply the address; the physical number is the thing you can hold.

References

- [1] Daubney, S. *The Universal Force of Time — Master Compendium*, v5. The Daubney Foundation, 2026.
- [2] NIST CODATA, *Recommended Values of the Fundamental Physical Constants*, 2022.
- [3] H. F. Iaccarino, A. J. Singer et al. (L.-H. Tsai), *Gamma frequency entrainment attenuates amyloid load and modifies microglia*, Nature 540, 230 (2016).
- [4] A. J. Martorell et al., *Multi-sensory gamma stimulation ameliorates Alzheimer's-associated pathology and improves cognition*, Cell 177, 256 (2019).
- [5] J. J. Palop & L. Mucke, *Network abnormalities and interneuron dysfunction in Alzheimer's disease*, Nat. Rev. Neurosci. 17, 777 (2016).
- [6] H. Braak & E. Braak, *Neuropathological staging of Alzheimer-related changes*, Acta Neuropathol. 82, 239 (1991).
- [7] L. Xie et al., *Sleep drives metabolite clearance from the adult brain*, Science 342, 373 (2013).
- [8] Daubney, S. *Parkinson's Disease in the Force of Time* (the shared 40 Hz motor carrier), The Daubney Foundation, 2026.

The Daubney Foundation is in ongoing discussions with medical establishments regarding clinical trials of Universal Force of Time solutions to the conditions described in this paper. Any institution or researcher wishing to put themselves forward for participation in these trials is invited to make themselves known through: thedaubneyfoundation@gmail.com

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