THE UNIVERSAL FORCE OF TIME

Cancer

A cell that loses its address — why it runs its programme backwards, why killing it makes it worse, and why the cure is to send it home

Stephen Daubney · The Daubney Foundation · 2026 · Rev 7

> ***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 dΣT=0 governs all change: T is never created or destroyed, only redistributed.*

Abstract

Cancer is not, in the Universal Force of Time, a random accumulation of genetic accidents. It is a single deterministic event with two faces. Seen one way, a cell's T-address slips a hair's breadth off the {2,3,5,π} lattice that governs all biology — into the empty gap between nodes where an apparent prime, a 7, happens to lie; off the lattice nothing is stable, and a cell that cannot settle on its address divides without end. Seen the other way, that same slip is a direction: the cell is running its developmental programme backwards, its adult address reverting toward the foetal register it came from — re-lighting foetal proteins (AFP, CEA), the embryonic stem-cell factors (OCT4, SOX2, NANOG), telomerase, and the foetal glycolytic metabolism Otto Warburg saw a century ago. From this single picture follow the thermal address 36.864 °C ($2^9\times3^2/5^3$), contact inhibition as a synchronisation handshake, the register-collapse cascade from nucleus ($D=-2$) to organism ($D=-5$), metastasis as node-matching, and the twenty-class taxonomy. With the mechanism in hand the paper resolves onto the proven medical spine: the disease is read as **three** faults — one in each register a restoration must reach — and each is paired with the principle of its repair. The **nucleus** *has slipped off its node*, and the answer is to *re-seat the address*; the **energy** register *has fallen* from the 36-node to bare glycolysis, and the answer is to *restore the 36 node*; the cell *is out of register with the whole*, and the answer is to *re-impose the whole*. Because the drift climbs the register hierarchy, a restoration must reach every climbed level at once, and early. One law binds the account: under dΣT=0, killing the fastest-dividing cells removes the most-departed and selects the survivors that depart further — compensation without restoration, the reason recurrence is structurally worse — while restoration ends the departure and leaves no resistant survivor. Medicine already cures one cancer exactly this way. Cancer is therefore theoretically curable across its full spectrum; the barrier is strategy, not biology. Every diagnostic number is given at full precision; the precise corrective signal is held in confidence pending clinical trial.

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

1 Cancer is not random — the T-address

Every living cell carries an address. Not a metaphor — a precise coordinate within the {2,3,5,π} lattice that governs all biology, written as (D-level, Strand-1 node, Strand-2 harmonic). At that address the cell's whole chemistry sits in the smooth {2,3,5} zone: its enzyme kinetics, its protein folding, the fidelity with which it copies itself, all calibrated to the body's thermal node. The address is held in place by the suppressor-gene network — p53, BRCA1/2, APC, RB1, PTEN — which is nothing other than the cell's own instantiation of the conservation law dΣT=0: a self-correction machinery that pulls the cell back to its lattice node whenever it drifts. Conventional oncology sees a stochastic shower of mutations; the Force of Time sees one deterministic event — the loss of the address itself.

And the address is written where you would least expect it. The 98% of the human genome that science long dismissed as junk is, in the Force of Time, the T-address space — the coordinate system that locates a cell within the body's lattice, the part of the DNA that says not *what protein* but *where in the field*. The protein-coding 2% builds the machine; the silent 98% tells the machine where it stands. Cancer is damage to the standing-where, not only to the machinery — which is why a cancer cell can keep its proteins and still forget entirely what it is.

Here is the heart of it. Seven — the smallest prime outside {2,3,5} — does not sit on the lattice at all. On the Earth register the lattice is {2,3,5,π} and nothing else; there is no prime-7 node for a cell to move onto, because a prime-7 position is not a node but a point in the empty space between the nodes. So cancer is not a cell climbing onto a new address. It is a cell whose true {2,3,5,π} value has drifted a hair's breadth off its node, into that off-lattice gap, where an apparent prime reading — an integer such as 49 — happens to lie. While the suppressor network holds, it pulls the drifted value home. When the network fails, the value cannot settle anywhere, and a cell that cannot settle on its address is a cell that divides without end. The 7 is the signature of that drift, never a destination.

2 The cell running backwards — reversion to the foetal register

Now the second face of the same event, and the one that turns a list of mutations into a story. A drift off the lattice is not a random direction. It is a direction back the way the cell came. Every adult cell reached its somatic {2,3,5,π} address by a journey — from the fertilised egg, through the foetal and progenitor registers, to the finished hepatocyte or pneumocyte or neuron it became. That journey is the inscription of the address. Cancer is that journey run in reverse: the somatic node is let go, and the cell falls back toward the developmental register it occupied before it grew up.

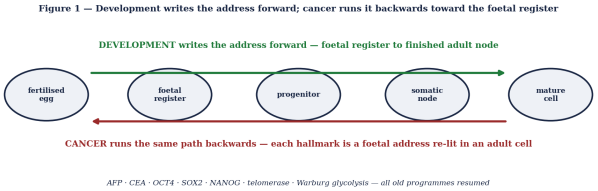

Figure 1 — Development writes the address forward, from the foetal register to the finished adult node; cancer runs the same path backwards. Each hallmark of the disease is a foetal address re-lit in an adult cell.

This is not speculation imposed on the data — it is what the data has been saying all along. A cancer cell re-lights the proteins of the unborn: alpha-fetoprotein and carcinoembryonic antigen, made in abundance by the foetus and silenced at birth, reappear in liver and gut tumours and are used in the clinic to track them. It switches the embryonic master-genes — OCT4, SOX2, NANOG, the very factors that hold a stem cell pluripotent — back on. It restarts telomerase, the chromosome-end enzyme that every embryonic cell runs and every adult cell switches off. And it falls back to the embryo's way of making energy, the Warburg glycolysis of Section 6. None of these is a new invention the cancer cell acquires. Each is an old programme resumed.

And here the two faces lock together. The foetal address is not in itself corrupt — in the embryo it is coherent and useful, because the developmental field all around it switches it off on schedule once the building is done. The error is the register: a developmental address re-expressed in a finished adult body, where there is no developmental field left to terminate it. So the resumed foetal programme runs without its off-switch — a construction crew still building after the house is complete, an address with no field to call it home. That is why the reversion reads as an off-lattice value that cannot settle: it is a real address in the wrong register, and in that register it has no node to rest on. The slip off the {2,3,5,π} lattice and the reversion to the foetal register are the same sentence read from its two ends.

3 The thermal T-coordinate — 36.864 °C

The body holds one temperature, and it is an exact lattice value, not a biological average. **36.864 °C** (= $2^9 \times 3^2/5^3 = 4608/125$) — pure {2,3,5}, the thermal node at which the cell's reactions sit on the lattice (equivalently **310.014 K**, the G1 Time-Equalisation resonance). The tumour microenvironment runs hotter, at 37.3–37.9 °C, a 0.5–1.0 °C displacement that lands on no {2,3,5} node at all — it has drifted off the lattice into the same gap the address has. The number is therefore diagnostic and directional at once: a malignant population has literally left the body's thermal address. Nudging it back toward 36.864 °C is a direct fine-tuning onto the lattice; the principle is given here, and the specific corrective regime is held in the confidential clinical reference.

4 The off-lattice signature — MYC, BRAF and the suppressor gate

MYC — the 49 lock, and what 49 really is. MYC gives the cleanest demonstration of what off-lattice means. Science reads the MYC amplification lock at the integer **49** (= 7^2) — the level above which the disease runs autonomously. But 49 is not a lattice value: 7 lies outside {2,3,5,π} entirely, so 49 sits in the gap between the lattice nodes, where nothing can settle. The integer the clinic measures is a rounded face of the disease itself — the very signature of the illness is that the cell has landed on a false prime where no stable address exists (Figure 2).

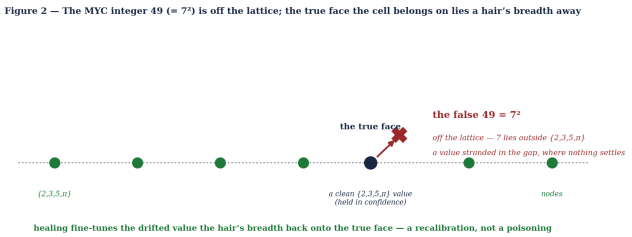

Figure 2 — The integer science records as 49 (= 7²) is off the lattice: a value stranded in the gap where no stable address exists. The true {2,3,5,π} value the cell belongs on lies a hair's breadth away; its precise figure is held in confidence. Healing fine-tunes the drifted value back onto the true face — a recalibration, not a poisoning.

Where the cell belongs. The healthy cell does not rest on the 7. It rests on a true {2,3,5,π} value a hair's breadth away from the false 49 — a value built entirely from {2,3,5,π} grammar, with no 7 anywhere in it. The Force of Time has derived that true value precisely; because it is the coordinate a restoration would tune the cell back onto, the figure itself is held in confidence, to be shared with medical institutions through trials conducted under the Foundation's supervision. What the public account states is the principle, which is enough to see the whole shape of the disease: a healthy cell rests on the true face; cancer is the slip the hair's breadth onto the false 49; and the correction is a fine-tuning back onto the true face — not a poisoning, a recalibration.

BRAF V600 — drift off the {2,3,5} boundary. The valine-to-glutamate substitution at codon 600 of BRAF maps, in the UFOT spectral register, to a node on the orange–red boundary that marks the edge of the T-stable {2,3,5} domain. The constitutively active BRAF V600E kinase is a cell that has drifted off that boundary into the off-lattice gap, broadcasting a proliferation signal the {2,3,5} regulators can no longer pull back. Gene-codon coordinate and spectral node are the same lattice position read at two scales; the precise node value, like the MYC face, is held in confidence.

p53 — the dΣT=0 gate. p53 is the primary T-correction gate of the cell cycle: it halts division (the lattice check), initiates DNA repair (T-address verification), or triggers apoptosis (T-address deletion) when correction fails. TP53 is mutated in roughly half of all human cancers — the single most frequent loss of {2,3,5} enforcement — and every TP53 mutation is the specific removal of one dΣT=0 node. The wider network — BRCA1/2 as the T-checksum, APC as the WNT {2,3,5} anchor, RB1 as the cycle lattice-lock, PTEN as the {5} enforcer — are the redundant guards of the same address.

5 Contact inhibition — the broken handshake

Healthy tissue does something quietly miraculous: a cell knows to stop dividing when it touches its neighbours. Medicine calls this contact inhibition and has never fully explained it. The Force of Time reads it as a synchronisation handshake. Adjacent cells share a D-level, and each holds its address against the Strand-1 node of the cell beside it; a tissue is a lattice of cells locked in Time-Equalisation with one another, each one a clock keeping time with its neighbours. The "stop dividing" signal is not a chemical command so much as the simple fact of being in register with the cells around you — a cell already in phase has no room to divide into.

A drifted cell cannot make the handshake. Having left its node, it can no longer read the addresses of its neighbours, so it never receives the synchronisation that says enough. It divides into a space it should have sensed was already filled. This is why loss of contact inhibition is one of the earliest visible marks of malignancy: it is the outward sign that a cell has fallen out of register with the tissue it belongs to — the broken handshake made visible under the microscope.

6 The Warburg shift — the foetal metabolism resumed

A century ago Otto Warburg noticed something strange: cancer cells, even with oxygen freely available, fall back on a primitive, wasteful way of making energy. A healthy adult cell runs oxidative phosphorylation in its mitochondria and draws about **36** units of ATP (36 = $2^2 \times 3^2$) from a single glucose — a clean {2,3} node, the full register. The cancer cell abandons it for aerobic glycolysis, drawing only about **2** units (2 = {2} only) from the same glucose. The {3} is gone. The energy address has dropped off its node, from the rich 36 down to a bare {2}.

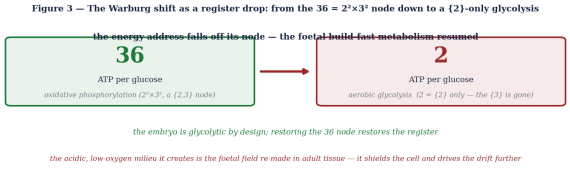

Figure 3 — The Warburg shift as a register drop: the mitochondrial energy address falls from the 36 = $2^2 \times 3^2$ node (oxidative phosphorylation) to a {2}-only glycolytic pathway. The embryo is glycolytic by design; the cancer cell resumes the foetal programme. Restoring oxidative phosphorylation is restoring the register.

And this is exactly the reversion of Section 2 read in the language of sugar. The embryo is glycolytic by design: it grows in a low-oxygen field and needs the carbon building-blocks of glycolysis to construct biomass fast, not the patient efficiency of the adult mitochondrion. So the Warburg cell is not inventing a broken metabolism — it is resuming the foetal one, the metabolism that belonged to the register it is drifting back toward. The acidic, low-oxygen microenvironment this creates is the foetal milieu re-created in adult tissue, and it does what the foetal milieu did: it shields the cell from immune T-surveillance and drives the drift further. The reverse is just as telling — returning a cancer cell to oxidative phosphorylation, restoring the 36 node, is one of the surest signs that the register has been recovered.

7 The register-collapse cascade — D=−2 to D=−5

Cancer does not stay where it starts; the drift climbs the T-address hierarchy (Figure 4). The hierarchy runs from the molecular bond (D=−1) up through the nucleus (D=−2), the cell-type register (D=−3), the organ (D=−4) and the organism (D=−5), each a {2,3,5,π} address nested in the one above. The malignant drift begins at D=−2 and propagates upward in four clinically familiar stages. **Stage 1 (initiation):** the value drifts off the DNA-register node at D=−2. **Stage 2 (promotion):** the drift reaches D=−3 and the cell loses its tissue-type identity — clinically, dedifferentiation, which is precisely the reversion of Section 2 made visible. **Stage 3 (progression):** it reaches D=−4 and the cell can implant in foreign tissue — clinically, metastasis. **Stage 4 (terminal):** D=−5 is corrupted and T-equilibrium fails across multiple organs. The clinical staging of cancer is, in the Force of Time, a direct readout of how far the drift has climbed — and, as Section 13 shows, how far it has climbed is what decides whether it can be brought home.

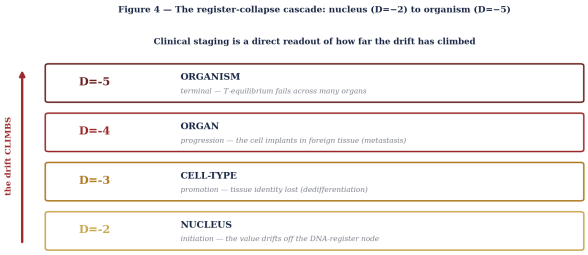

Figure 4 — The four-stage register-collapse cascade: the drift climbs the T-address hierarchy from nucleus (D=−2) to organism (D=−5), matching initiation, promotion, progression and terminal staging. Restoration re-tunes each D-level back onto its node.

8 Metastasis — the embryo's migration programme, re-lit

Metastasis is the most feared turn of the disease, and the most revealing. A cancer does not scatter at random: breast cancer goes preferentially to bone, lung, liver and brain; prostate to bone; colon to liver. Medicine has called this the "seed and soil" puzzle for over a century without resolving why a given seed needs a given soil. The Force of Time answers it directly, and again the answer is the reversion. The ability to leave a tissue and travel is not a new power the cancer cell acquires; it is the migration programme that every cell once used, in the embryo, to crawl to its appointed place while the body was being built. E-cadherin — the adhesion node that anchors an adult cell to its anatomical address — is let go (the epithelial-to-mesenchymal transition), and the cell recovers the motile, unanchored behaviour of the embryo.

Where it settles is then decided by node-matching. A wandering cell can only re-implant where it finds a host node compatible with the address it carries: it settles in the tissue whose D=−4 register lies closest to its own corrupted one, the way a key turns only in a lock cut to fit it. Organ tropism is therefore orderly, not chaotic — the cell goes where its drifted address can find purchase. Knowing the initiating node predicts the metastatic trajectory, which is exactly what the clinic observes and what the taxonomy of Section 15 sets out.

9 Replicative immortality — the clock off the lattice

An ordinary human cell can divide only so many times — close to **50** divisions ($50 = 2\times5^2$), the Hayflick limit, a clean {2,5} node — before it retires. The count is kept by the telomeres, the protective caps on the ends of the chromosomes that shorten a little with each division: the telomere clock is the cell's built-in lattice timer, ticking down through a {2,5} address toward a planned stop. Apoptosis, the programmed death that follows, is simply the body's natural Time-Equalisation reset — a worn cell returning its T to the field so that a fresh one can take its address. There is nothing tragic in it; it is dΣT=0 keeping the books.

Cancer breaks the clock — by the same reversion. Telomerase, the enzyme that resets the count, is the embryonic default: every foetal cell runs it, every adult cell switches it off. Switching it back on stops the telomere count from falling, decoupling the timer from its {2,5} node and erasing the planned stop. What science calls replicative immortality is, in the Force of Time, a clock cut loose from the lattice — a cell that has recovered the embryo's endless count and so can never return its address to the field. Immortality of this kind is not a triumph over death; it is the loss of the lattice node that made an orderly death possible.

10 The six hallmarks as register drift

The six classical hallmarks of cancer each re-read as the loss of one {2,3,5,π} lattice function (Figure 5). Sustained proliferative signalling is the drifted value broadcasting past the suppressor gate. Evading growth suppressors is the loss of the dΣT=0 enforcement node itself. Resisting cell death is the disabling of T-address deletion, the apoptosis of Section 9. Enabling replicative immortality is the telomere clock decoupled from its {2,5} node. Inducing angiogenesis is the tumour building an off-lattice supply line. Activating invasion and metastasis is the D=−4 register breach of Section 8.

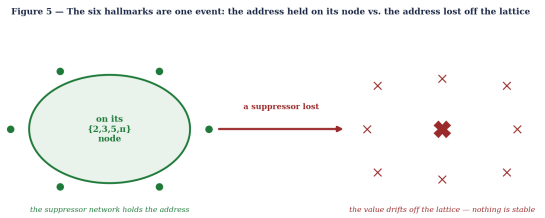

Figure 5 — The address held vs. the address lost: the suppressor network keeps the cell on its {2,3,5,π} node; loss of a suppressor lets the value drift off the lattice, where nothing is stable. Cancer is the drift winning.

Two further enablers — the reprogrammed energy metabolism of the Warburg shift and immune evasion through the off-lattice PD-L1 shield — are the metabolic and surveillance faces of the same exit. The hallmarks are not a list of independent tricks; they are the symptoms of one address leaving one lattice. With the whole mechanism now in hand — the address, the reversion, the thermal node, the off-lattice signatures, the broken handshake, the fallen metabolism, the climbing cascade, the migration programme and the freed clock — we can read the disease the way a clinician must: as a definite set of faults, each with a definite answer.

11 Three registers a cancer must be brought home through — and the correction of each

Everything to this point has been mechanism. Now we read it as repair must read it: not as one shapeless category of malignancy but as three distinct things going wrong, each in a different register of the cell, each a definite physical fault with a definite Force-of-Time answer. The three are not chosen for symmetry — they are the three registers the drift actually climbs through and that a restoration must therefore reach: the nucleus where the address is written (D=−2), the mitochondrial energy plant (D=−4), and the whole organism (D=−5). The answers below are *principles*, not prescriptions — the direction in which each register is to be re-tuned, never a therapy named here (Figure 6).

Route 1 — THE ADDRESS HAS SLIPPED OFF ITS NODE (nucleus · D=−2)

The first fault is the one all the others grow from. The cell's {2,3,5,π} address has drifted the hair's breadth off its node into the off-lattice gap — the false 49 of Section 4 — and the suppressor gate that should pull it home (p53 and the dΣT=0 network) can no longer do so. This is initiation: the value is loose at D=−2, the foetal address begins to re-light, telomerase comes back on, and the cell has begun to forget what it is. Everything downstream — the fallen metabolism, the broken handshake, the migration — is this nuclear slip propagating upward.

Correction 1 — RE-SEAT THE ADDRESS

Because the fault is a drift and not a deletion, the answer is not to kill the cell but to return its address to its node. Re-tune the drifted T-coordinate the hair's breadth back onto its true {2,3,5,π} face and the cell is no longer cancerous: it reads its node again, the suppressor gate re-engages, and it resumes the somatic programme it had abandoned. This is recalibration, not poisoning — the existence proof in Section 12 shows it is already done in one disease. The true face onto which the address is re-seated, and the precise corrective signal that achieves it, are held in the Foundation's confidential clinical reference; the principle is re-seating, and that is given here in full.

Route 2 — THE ENERGY ADDRESS HAS FALLEN (energy · D=−4)

The second fault is in the power plant. With the nuclear address loose, the cell's metabolism falls off its node: from oxidative phosphorylation at the rich **36** (= $2^2 \times 3^2$) down to the bare **2** (= {2} only) of aerobic glycolysis — the Warburg shift of Section 6, the foetal build-fast metabolism resumed. This is not a side-effect; it is a register in its own right, and it actively deepens the disease: the acidic, low-oxygen milieu it creates is the foetal field re-made in adult tissue, shielding the cell from immune T-surveillance and driving the drift further.

Correction 2 — RESTORE THE 36 NODE

The answer is to return the energy address to its node — to restore oxidative phosphorylation, the 36-node metabolism of the mature cell. Recovering the 36 node is recovering the register: it dissolves the acidic shield, re-exposes the cell to immune surveillance, and removes the metabolic engine of fast, undirected growth. Restoring the 36 node is one of the surest signs that the register has been brought home; the means of achieving it are held in confidence, the principle — return to the 36 node — is stated openly.

Route 3 — THE CELL IS OUT OF REGISTER WITH THE WHOLE (organism · D=−5)

The third fault is the cell's relation to everything around it. A drifted cell can no longer read its neighbours' addresses, so the contact-inhibition handshake of Section 5 breaks and it divides into space it should have sensed was filled; the telomere clock of Section 9 cuts loose from its {2,5} node and the orderly death is lost; the embryonic migration programme re-lights and the cell metastasises by node-matching; and the whole-body Time-Equalisation that holds the organism in one coherent register fails. This is the climb reaching D=−5 — the cell is no longer a citizen of the tissue but a thing apart, hidden from the immune field that should have caught it.

Correction 3 — RE-IMPOSE THE WHOLE

The answer at this register is not cell-by-cell but whole: re-impose the organism's Time-Equalisation and its immune T-surveillance, so the cell is brought back into register with the body around it. Re-establish the synchronisation handshake and the drifted cell can read its neighbours again; restore immune surveillance and the shielded population is seen. The whole is the field that terminates a developmental programme on schedule; re-imposing it supplies the off-switch the resumed foetal address never had. The principle is to restore the whole; the protocol is held in confidence.

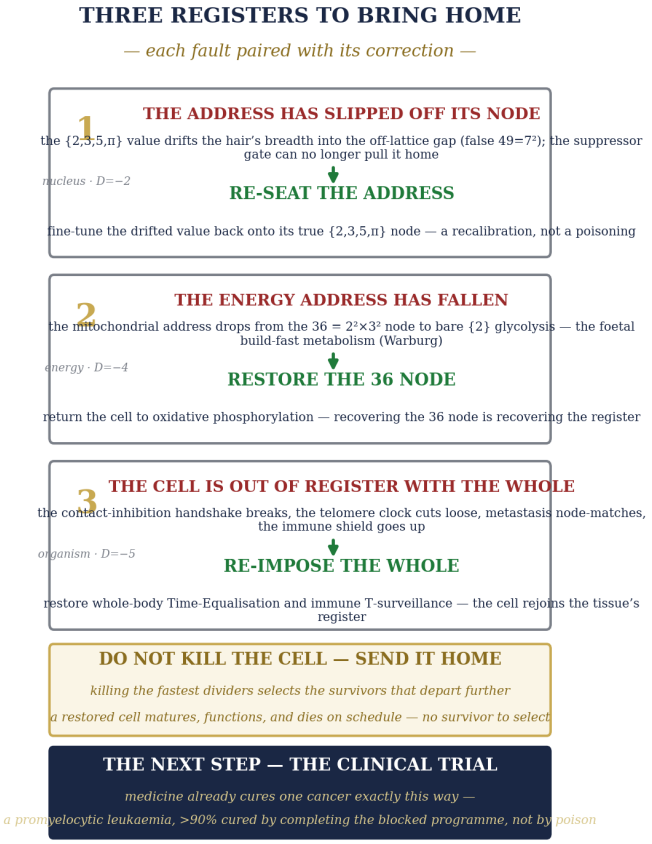

Figure 6 — The three registers a restoration must reach, each fault paired one-to-one with the principle of its repair: the nucleus re-seated, the energy node restored, the whole re-imposed. Killing selects; restoration ends the departure. Medicine already cures one cancer exactly this way.

12 Why killing fails, the order of the three, and the law that binds them

Here the paper turns from what to do to why one strategy works and another cannot, and the first thing to say is uncomfortable: the instinct to kill the cancer cell is the instinct that keeps cancer incurable. A tumour is not a uniform mass but a population of cells at every depth of departure — some only lightly drifted, some maximally reverted, every shade between. Cytotoxic chemotherapy and high-dose radiation kill in proportion to how fast a cell divides, and the fastest dividers are the most-departed cells. So the cull falls hardest on the cells furthest from home, and spares the ones at intermediate departure.

Now the environment that drove the departure has not changed, and the survivors are under fierce selection: the most-departed phenotype has just been cleared out of their way. They depart further. When the tumour returns — and across the solid cancers it usually does — it is more genomically unstable, more resistant to the drug that first shrank it, more ready to spread. This is the **compensation-without-restoration** law: the treatment reduces the visible burden (compensation) while selecting for deeper departure (no restoration), and the apparent early victory is paid for by a fiercer relapse. It is not bad luck and not bad medicine practised carelessly; it is the structural consequence of answering a departure-cascade with a cull. A killing strategy, applied to a problem of lost address, triggers the very law it is trying to escape.

Restoration cannot select, because it creates no survivor population. Re-seat the address, restore the 36 node, re-impose the whole — and the cell finishes the somatic programme it had abandoned, matures, functions, and undergoes the ordinary programmed death of a mature cell, returning its T to the field on schedule. The compensation-without-restoration law has nothing to act upon. This is the whole difference, and it is categorical: killing answers a departure with a cull; restoration answers it by ending the departure.

And this is not a hope held out for the future. Medicine already cures one cancer in precisely this way. There is a form of promyelocytic leukaemia in which the malignant cells are frozen one single step short of becoming mature blood cells — a developmental programme blocked, a foetal-register address held open. The treatment that cures it does not poison those cells. It gives them the signal that completes the blocked step, whereupon they finish maturing into normal cells and die on the natural schedule of mature blood cells. The cure rate exceeds 90%, including in advanced disease, and the aggressive resistant relapse that haunts cytotoxic oncology does not appear — because nothing was selected, only restored. It is the clearest proof the framework could ask for: a cancer dissolved not by killing but by sending its cells home to finish growing up.

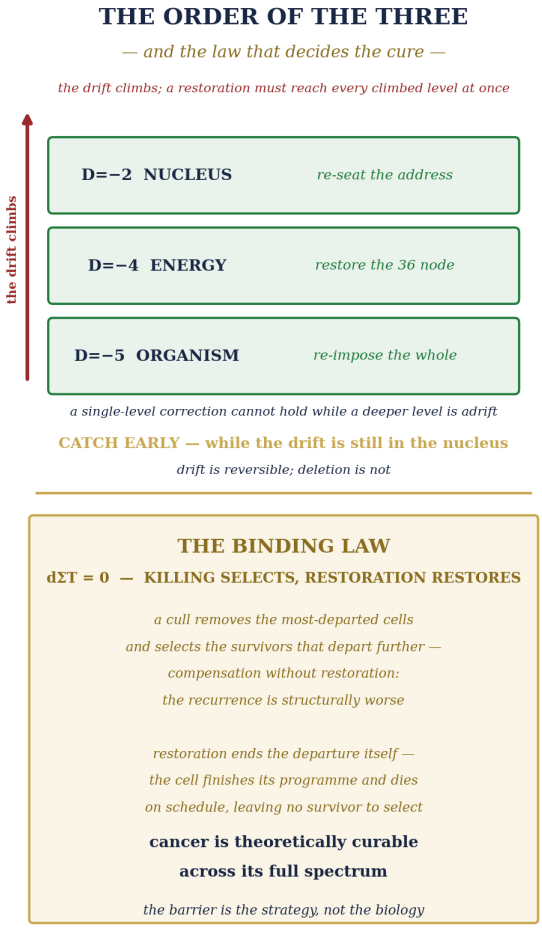

Figure 7 — The order and the binding law. Because the drift climbs the register hierarchy, a restoration must reach every climbed level at once — nucleus, energy and organism — and early, while it is still confined to the nucleus. Under dΣT=0, killing selects for deeper departure; restoration ends the departure. Cancer is theoretically curable across its spectrum; the barrier is strategy, not biology.

This sets the order of the three. Because the drift climbs the register hierarchy, full restoration must reach every level it has climbed, and at once: the nuclear register (D=−2), where p53 and cell-cycle control belong; the mitochondrial register (D=−4), where the Warburg shift is reversed and the 36-node energy address recovered; and the organism register (D=−5), where whole-body Time-Equalisation and immune T-surveillance are re-imposed. A single-level correction cannot hold while a deeper level is still adrift — re-seat the nucleus while the energy register stays glycolytic and the milieu pulls it off again; restore the metabolism while the whole stays blind and the immune field never catches the survivor. Drift is reversible; deletion is not. Catch the drift early, while it is still confined to the nuclear

register, and the value can in principle be returned home before the cascade climbs beyond reach. The principle is stated here in full; the precise corrective wavelengths and frequencies that re-tune each register, and the developmental signal matched to each blocked stage, are calculated and held in confidence, to be shared with medical institutions through clinical trials conducted under the Foundation's supervision.

13 Curability tracks how far the cell has travelled

Put the two halves together and a law falls out that re-draws the map of which cancers can be cured. Curability is not a fixed property dividing "curable" cancers from "incurable" ones. It tracks two things: how far the address has departed, and whether the cull-and-select trap can be kept from operating. A shallow drift caught before it has seeded other sites — a Stage 0 or Stage 1 tumour removed whole, or a leukaemia of childhood with few accumulated departure events — can be brought home or cleared completely before the cascade has any intermediate-departure survivors to select; cure rates approach the whole. The deeper and more widely seeded the departure, the more the disease has the population structure that the killing trap feeds on.

This is why the cancers we presently call incurable — glioblastoma, pancreatic cancer, most widely spread solid tumours — are incurable. It is not because cancer is a fundamentally insoluble biological problem. It is because, within a treatment paradigm built on cell-killing, the compensation-without-restoration law guarantees progressive failure whenever complete eradication is not achieved. The Force of Time states the position plainly: cancer is theoretically curable across its full spectrum. The barrier to curing the currently incurable cancers is not their biology but the application of a strategy that triggers the cascade it is trying to arrest. Replace cull-and-select with identify-the-blocked-stage-and-restore-it, and the spectrum opens. The task that remains is identification — finding, for each cancer, the developmental signal that completes its particular arrested programme — not invention. Every developmental register already has a programme-completion signal; evolution built them to construct the body in the first place.

14 Cancer stem cells — the deepest off-lattice anchor

Cancer stem cells are the subpopulation in which the drift has reached its most stable off-lattice anchoring — the deepest point of the reversion, nearest the foetal register — and every property attributed to them follows from that. Self-renewal is the off-lattice value reproducing itself indefinitely because nothing returns it home; therapy resistance is the simple fact that a cull tuned to fast division cannot reach a slow, deeply anchored value; and the ability of a single such cell to re-initiate a whole tumour is that anchored value re-seeding the register space it has captured. They are not a separate kind of cell but the deepest reach of the same drift — which is why a treatment that clears the bulk of a tumour but cannot reach this anchor leaves the disease able to return, and why a restoration that reaches the anchor leaves nothing behind to return.

15 The 20-cancer T-taxonomy — one cancer per amino acid

The Force of Time classifies cancers by the T-register node at which the drift initiates: which {2,3,5} suppressor is lost first, which driver runs off-lattice in its place, and — the part that names the cure — which developmental register the cell reverts toward. There are twenty principal classes, and they map one-to-one onto the twenty amino acids, both being {2,3,5} register addresses at which a specific off-lattice drift can take hold. The reverted register is the therapeutic target: it tells you which developmental programme is arrested, and therefore which completion signal would send the cell home. The full taxonomy is Table 1 in the appendix; the first six classes are the worked exemplars of Sections 4 to 8, and the remaining fourteen follow the same suppressor-loss to off-lattice-driver to reverted-register logic.

16 What cancer is

Cancer is one event with two faces and one cure. A cell's T-address slips off the {2,3,5,π} lattice when the suppressor network can no longer hold it; the same slip is a reversion, the cell running its developmental programme backwards toward the foetal register it came from, where its resumed construction programme has no field to switch it off. The thermal address 36.864 °C, the MYC lock off the false 49 (= 7^2), the BRAF boundary drift, the broken contact-inhibition handshake, the Warburg metabolism, the four staging registers, the node-matching of metastasis, the decoupled telomere clock and the twenty amino-acid classes are not separate findings; they are one structure read at different scales. And because the fault is a drift rather than a destruction, it is correctable — but only by the right kind of answer. Re-seat the address, restore the 36 node, re-impose the whole; reach every climbed register at once, and early. To kill the cell is to cull the most departed and breed the rest; to restore its address is to end the departure, and a cancer already exists that medicine cures exactly so. The principle is given here in full and at full precision; the prescription is held in trust. Catch the drift early, send the value home, and the cell finishes the life it had abandoned.

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

Appendix A — The Three Registers at a Glance

The three routes are the three registers the drift climbs through and a restoration must reach. Because the drift climbs, a restoration must reach every climbed level at once, and early — a single-level correction cannot hold while a deeper level is adrift. Every correction is a principle — a direction of re-tuning — never a therapy named here; all protocol detail is held in the Foundation's confidential clinical reference. Under dΣT=0, killing selects for deeper departure; only restoration ends it.

Register	The fault	The correction (principle only)	What it restores
Nucleus (D=−2)	the {2,3,5,π} address drifts the hair's breadth off its node into the off-lattice gap (false 49=7²); the suppressor / p53 gate can no longer pull it home — initiation	re-seat the address — fine-tune the drifted value back onto its true {2,3,5,π} node (a recalibration, not a poisoning)	the cell reading its own node again, suppressor gate re-engaged
Energy (D=−4)	the mitochondrial energy address falls from the 36 = 2²×3² node (oxidative phosphorylation) to bare {2} glycolysis — the foetal build-fast metabolism (Warburg)	restore the 36 node — return the cell to oxidative phosphorylation	the register recovered; the acidic immune-shielding milieu dissolved
Organism (D=−5)	the contact-inhibition handshake breaks, the telomere clock cuts loose, metastasis node-matches, immune surveillance is evaded — whole-body TEQ fails	re-impose the whole — restore organism Time-Equalisation and immune T-surveillance	the cell back in register with the body; the off-switch the foetal address lacked

Appendix B — The 20-Cancer T-Taxonomy

Each class is defined by which {2,3,5} suppressor is lost first, which driver runs off-lattice in its place, and which developmental register the cell reverts toward. The reverted register is the therapeutic target — it names the arrested programme whose completion signal would send the cell home. The twenty classes map one-to-one onto the twenty amino acids. Driver and suppressor genes are the established oncology assignments, read here as lattice coordinates.

#	Cancer	{2,3,5} suppressor lost first	Off-lattice driver	Reverts toward (developmental register)
1	Melanoma	CDKN2A / BRAF {2,3,5} boundary	BRAF V600E (off the {2,3,5} boundary)	neural-crest stem cell
2	Breast (BRCA)	BRCA1/2 T-checksum	HER2 / MYC membrane cascade	ductal / mammary progenitor
3	Colorectal	APC {2,3,5} WNT anchor	KRAS / RAS amplifier loop	intestinal crypt progenitor
4	Lung (NSCLC)	TP53 / STK11 {2,3,5} node	EGFR / KRAS receptor	pulmonary progenitor
5	Pancreatic	SMAD4 {3,5} node	KRAS G12D lock	pancreatic ductal progenitor
6	Glioblastoma	PTEN {5} enforcer	EGFRvIII amplification	glial progenitor
7	Prostate	PTEN {5} enforcer	AR / MYC drive	luminal progenitor
8	Ovarian	BRCA1/2 + TP53	MYC amplification	Müllerian / surface epithelium
9	Leukaemia (AML)	TP53 / RUNX1	FLT3-ITD signal	myeloid progenitor (early)
10	Leukaemia (APL/CML)	suppressor loss	PML-RARα / BCR-ABL fusion	promyelocyte (one step to mature)
11	Lymphoma	TP53 {2,3,5} gate	MYC (Burkitt) / BCL2	germinal-centre B cell
12	Gastric	CDH1 / TP53	HER2 membrane	gastric foveolar progenitor
13	Liver (HCC)	TP53 gate	CTNNB1 / TERT	foetal hepatoblast (AFP+)
14	Kidney (RCC)	VHL {2,3,5} node	HIF / MET axis	nephron progenitor
15	Bladder	TP53 / RB1	FGFR3 receptor	urothelial basal cell
16	Thyroid	suppressor loss	BRAF / RET driver	thyroid follicular progenitor
17	Sarcoma	RB1 / TP53	MDM2 / fusion	mesenchymal stem cell
18	Cervical	TP53 / RB1 (HPV E6/E7)	HPV integration	squamous basal cell
19	Oesophageal	TP53 gate	CCND1 amplification	squamous / Barrett progenitor
20	Endometrial	PTEN / TP53	PIK3CA drive	endometrial glandular progenitor

Appendix C — The Ledger

Table A1 — Propositions P-CANC-1 … P-CANC-12, P-COMP-1, P-CTD-1 … P-CTD-3

#	Proposition
P-CANC-1	Cancer is a T-address drift off the {2,3,5,π} lattice. Prime-7 is not a lattice node but lies outside the lattice entirely, so the disease is a value knocked into the off-lattice gap, not a move onto a new address. The suppressor genes (p53, BRCA1/2, APC, RB1, PTEN) are the biological dΣT=0 self-correction; their loss lets the drift persist.

#	Proposition
P-CANC-2	The same drift is a retrograde reversion: the adult somatic address falls back toward the foetal / developmental register it came from. Evidence: foetal protein re-expression (AFP, CEA), embryonic stem-cell factors (OCT4, SOX2, NANOG), telomerase reactivation, foetal glycolytic metabolism. The foetal address is coherent only in the embryo, where the developmental field terminates it on schedule; resumed in a finished adult body it has no field to switch it off, so it runs without termination — a real address in the wrong register.
P-CANC-3	The thermal address is 36.864 °C = $2^9 \times 3^2/5^3$ (= 310.014 K, the G1 TEQ resonance); the 37.3–37.9 °C tumour microenvironment has drifted off every {2,3,5} node.
P-CANC-4	The MYC lock science reads as $49 = 7^2$ is an off-lattice integer face: 7 lies outside {2,3,5,π} entirely, so the disease value cannot settle. The true {2,3,5,π} value the healthy cell rests on lies a hair's breadth away; that value is the coordinate a restoration would tune the cell back onto, and it has been calculated and is held in confidence by the Foundation.
P-CANC-5	BRAF V600 = a cell drifted off the edge of the {2,3,5} boundary; V600E is the off-boundary state. p53 is the {2,3,5} lattice enforcer; TP53 loss (≈50% of cancers) removes a dΣT=0 node. The precise boundary node value, like the MYC face, is held in confidence.
P-CANC-6	Contact inhibition is a Time-Equalisation handshake: adjacent cells hold address against one another's Strand-1 node. A drifted cell cannot read its neighbours' addresses, so it never receives the "stop", and divides into space it should have sensed was filled.
P-CANC-7	The Warburg shift is the foetal metabolism resumed: oxidative phosphorylation ≈ 36 ATP/glucose ($36 = 2^2 \times 3^2$, a {2,3} node) falls to aerobic glycolysis ≈ 2 ATP/glucose (2 = {2} only), the embryo's build-fast metabolism. Restoring oxidative phosphorylation restores the register.
P-CANC-8	Metastasis re-lights the embryonic migration programme (E-cadherin loss / EMT); organ tropism is node-matching — a drifted cell re-implants only where a host D=−4 register lies close to its corrupted address. The initiating node predicts the trajectory.
P-CANC-9	Replicative immortality is a clock cut loose from the lattice: telomerase (the embryonic default, off in adult cells) is switched back on, decoupling the telomere timer (Hayflick ≈ 50 = 2×5^2, a {2,5} node) and erasing the apoptotic TEQ reset.
P-COMP-1	Compensation without restoration: cytotoxic killing removes the fastest-dividing (most-departed) cells and selects the intermediate-departure survivors, which depart further under selection pressure. Recurrence is therefore structurally more aggressive, resistant and unstable than the original disease. A cull cannot cure a departure-cascade; it feeds it.
P-CANC-10	Rectification is restoration, not killing: returning the drifted address to its {2,3,5} node makes the cell complete its programme, mature, function and die on schedule, leaving no resistant survivor for P-COMP-1 to select. Full restoration re-tunes every climbed register at once — nuclear (D=−2, re-seat the address), mitochondrial (D=−4, restore the 36 node), organism TEQ + immune surveillance (D=−5, re-impose the whole). The precise corrective wavelengths / frequencies are calculated and held confidentially pending trials under Foundation supervision.
P-CANC-11	Demonstrated proof of principle: a promyelocytic leukaemia in which the cells are arrested one step short of maturity is cured in >90% of cases by a signal that completes the blocked programme — the cells mature and die normally, with no P-COMP-1 relapse. Restoration cures where killing selects.
P-CANC-12	Curability tracks departure depth and whether P-COMP-1 can be prevented, not a fixed curable / incurable divide. Shallow, unseeded departure → near-complete cure; deep, widely seeded departure within a cytotoxic paradigm → P-COMP-1-guaranteed failure. The currently "incurable" cancers are barred by treatment strategy, not by biology; the remaining task is to identify each arrested register's completion signal.
P-CTD-1	Every cell holds a T-address (D-level, Strand-1 node, Strand-2 harmonic), written largely in the non-coding 98% of the genome — the T-address space. Cancer drifts the address off the lattice at D=−2 (nuclear).
P-CTD-2	Register-collapse cascade: D=−2 (initiation) → D=−3 (promotion / dedifferentiation) → D=−4 (progression / metastasis) → D=−5 (terminal / multi-organ). Clinical staging is a direct readout of how far the drift has climbed.
P-CTD-3	Each cancer type reverts toward a specific developmental register (Table 1); that register is the therapeutic target, naming the arrested programme whose completion signal would send the cell home.

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 temperature, a copy number, a wavelength, a count of divisions — and only then, in brackets and in grey, 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 temperature in a body here, a span of time in the heavens there, a mass in a nucleus somewhere else. The same number that sets a healthy cell's temperature can read, in another register, as a span of time or a mass in a nucleus. 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. None of the corrective figures is printed: the true {2,3,5,π} face onto which a cell is re-seated, and the precise wavelengths and frequencies that re-tune each register, are held in the Foundation's confidential clinical reference pending trial. A number kept here as register-identity — 36.864 °C as the thermal node, $36 = 2^2 \times 3^2$ as the energy node — is not a prescribed therapy; the same number as a prescription is held in confidence.

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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