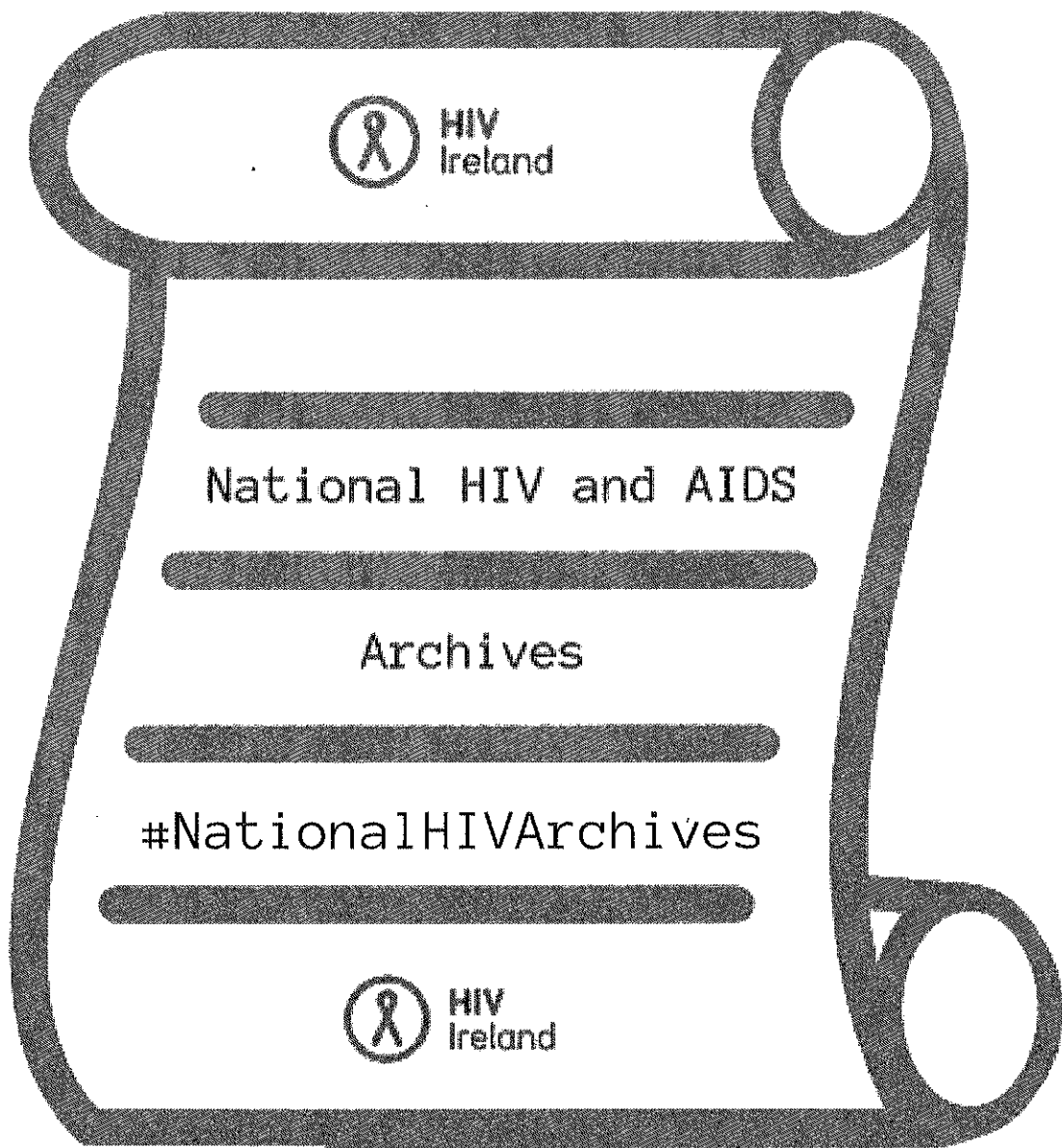


Print Media



11th to 15th January 1987

SUNDAY WORLD January 11th, 1987 3

AIDS: 'Too soft'

THE Fianna Fail spokesman on Health said this week that signs should be put up all over the country that "promiscuity can kill."

Dr. Sean McCarthy a member of the South Eastern Health Board dismissed the new multi million pound British cam-

paign against AIDS as "too softly, softly" and described the idea of people "wearing two condoms for safety" as rubbish.

And at the same meeting, schoolteacher Tom Ambrose said Irish hospitals should not be expected to take in "all these kind of people."

He added: "If people don't respect their bodies what can they expect."

AIDS and the church-state conflict

SIR — The present controversy surrounding the proposals for a campaign to combat the spread of AIDS highlights once again the tendency for vested interest groups to use any excuse to further their aims.

The vested interest groups on this occasion however, include almost every shade of political, social and moral hue in Ireland. One should point out that the pattern has been repeated throughout the world wherever an attempt to halt the spread of AIDS has been made. The potential for controversy in Ireland is probably greater given our national talent for words and our national consciousness of the certainty of our moral viewpoints.

While it is true that AIDS found its epidemic focus in the homosexual community of San Francisco, it did not then, nor does it now, depend upon homosexual activity for its transmission. The social, political and moral reasons for emphasising the homosexual link in the San Francisco epidemic were highly suspect, whatever about the validity of the epidemiological evidence.

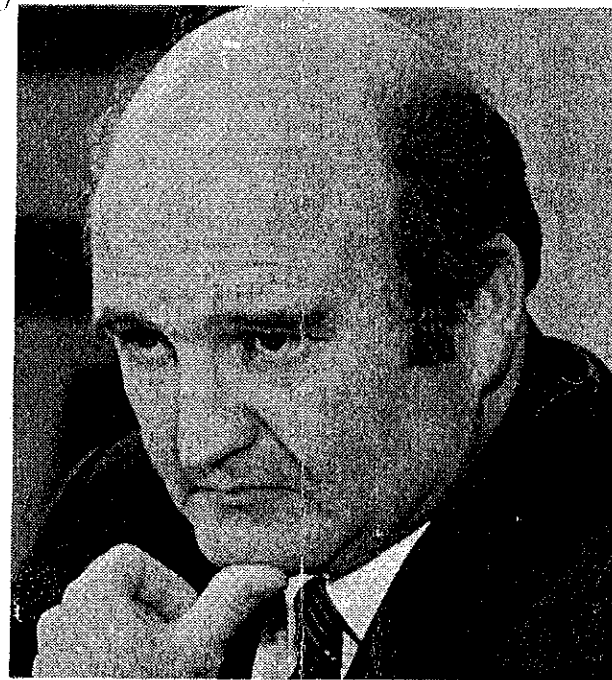
The tragedy now is that this 'deviant link' of homosexuality and drug abuse has remained firmly implanted in people's minds and the

consequences today are that it seems almost impossible to highlight or discuss the modes of transmission of the AIDS virus without moralistic overtones. At present, the diagnosis of AIDS produces not only a tragically sick person but also a social outcast.

Comparison with the biblical approach to leprosy is hard to escape. Protection of the general public against the AIDS virus is relatively simple. Protection of individuals in high risk groups such as users of blood products or drug abusers, is also relatively simple. Why then all this hysteria? Perhaps because certain vested interest groups seek to make gains from the spread of a disease which has in the public mind, taken over from the four horsemen of the Apocalypse.

Vincent Kenny,
Templeogue,
Dublin 16.

SIR — Once again the two conflicting ideologies of this country are at opposites with regard to an issue which could affect every man, woman and child. The Catholic Church and, for want of a better description, the secular state, differ in their approach to the plague AIDS. It is important to look at the credentials of both parties in order to come



● **BARRY DESMOND:** 'warned that anything that assisted promiscuity was irresponsible'

to some conclusion.

Two years ago Barry Desmond, Minister for Health, when he pushed through the contraceptive bill was warned by experts that AIDS was spreading and anything that assisted promiscuity was irresponsible. Although the bill went through the AIDS warning was ignored. Recently on television the minister stated he was not worried about homosexuals spreading

AIDS and in fact was in favour of decriminalising homosexual behaviour. Anyone with the remotest knowledge of AIDS would know the disease was spread in its earliest stages through promiscuous homosexual practices.

He stated that AIDS is now a heterosexual venereal disease and is no longer confined to homosexuals. Out of 599 cases of matured

AIDS in the UK only four were known to have resulted from heterosexual intercourse. Hardly a case to ignore the homosexual dangers.

If he follows the same line as the UK we can expect the sudden disappearance of homosexual practices as the major cause of the spread of AIDS. In fact the publicity given to the homosexual campaign warning on the spread of AIDS was repugnant to me at least.

All this of course is the 'demoralising' of the disease. Society which nurtured the plague by its permissiveness, liberal laws and declining moral standards would now pretend such attitudes had nothing to do with it. Even now the only action the state can come up with is a pathetic attempt to stop its spread with the use of condoms. The same condoms which were to stop unwanted pregnancies and other venereal diseases two years ago.

The Catholic Church on the other hand has always promoted chastity outside of marriage. This fact could well be the reason we in Ireland have a very low incidence of AIDS among heterosexuals. Something we may all have reason to thank them for yet. They have always condemned

homosexual practices. Yet it will be Christ's church which will probably look after the sick. Mother Teresa's hospice for AIDS victims in New York being one example. The Catholic Church's moral teaching is, if one is honest, the only way to prevent the disease from spreading.

Unfortunately the Church's teaching has been rejected and society is now like a rolling stone that cannot be stopped. Condoms will only slow the disease down and I fear for the innocents now.

While Barry Desmond educates the people and advises that condoms is his health board's contribution, the AIDS disease is not seen in its reality. The facts are that the virus has a great capacity to mutate. Already it can be found outside the blood in tear ducts, urine passages, colon etc and is only a matter of time before it will find other ways of transmittance. Already a new sub-type has evolved, so different that the antibody evoked is not picked up in standard screening tests. The implications of this are frightening. I fear the public relations exercise being put forward by the minister will in time be seen for what it is.

Redmond O'Hanlon,
Churchtown,
Dublin 14.

The fight back

AIDS

Why the minister should act now and not later

THE FIRST AIDS VICTIM died in Atlanta, Georgia, in the United States in the summer of 1981.

Last year, 18,000 Americans died from the disease.

The British government finally got around to launching its AIDS campaign last week. It will cost millions. And it will involve circulating every home with a leaflet warning about the dangers of AIDS.

So far, the Irish government has done nothing.

It's not that Ireland is any different from other countries. Nine people have already died from AIDS here. Hundreds — though the exact figure is not known — are carrying the deadly virus.

The whole population is at risk. AIDS is no longer — and probably never was — a disease that affects only homosexuals, drug users and haemophiliacs.

It is not enough to say "It can't happen to me." It can. And it will happen to many, many people who are reading this.

Sexual habits

Medical experts are now taking care of haemophiliacs and others who need regular supplies of blood. There will be unfortunate cases of infection still. But by and large, that problem has been solved.

The homosexual community is looking after itself. It has, in a responsible and calm way, launched an education programme giving them advice and counselling.

The biggest growth in AIDS victims now is among the heterosexual community, the majority of the population.

So far though, the Government has seen fit to do nothing.

It is talking to advertising agencies. They are working on advertisements. But the problem is far more urgent than their reaction would lead us to believe.

British Health Minister Norman Fowler said 1,000 people will die from AIDS in Britain in the coming three years. In that time, more Americans will die from AIDS than were killed in the Vietnam war. The toll in Africa will, it is reckoned, be counted in millions.

Ireland is no different. We will get, proportionately, the same number of deaths. Which means that in the coming years, hundreds of Irish people, more, perhaps, than are killed on the roads and far more than are killed by the IRA, will die from AIDS.

The only sure way of avoiding AIDS is by avoiding casual sex. Cardinal Basil Hume said this week: Promiscuity is the root cause of the present epidemic. It has always been sinful; it is rapidly becoming suicidal.

Many American states are now spending 50 per cent of their total health budgets on AIDS programmes. It is that serious.

Our Government is believed to be moving, but slowly. It has not revealed how much they will spend or how extensive their campaign will be.

No amount would be too much.

Because AIDS is, in a word, a death sentence.



WHAT EVERYONE NEEDS TO KNOW

FACT: In the summer of 1981 the United States Communicable Diseases Office in Atlanta, Georgia, noted a heavy demand for a drug used to treat a rare form of pneumonia. They found the patients were homosexual, haemophiliacs or Italian. They called that disease GRID or Gay Related Immune Deficiency. It was also called the Gay Compromise Syndrome. Recent research suggests that cases as far back as 1979 could have been AIDS. The acronym AIDS was first applied to the disease by the United States Public Health Service in September, 1982. It stands for Acquired Immune Deficiency Syndrome.

FACT: Blood samples from African Green Monkeys showed that 70 per cent were infected with a virus believed to be related to the human AIDS virus. The infection has few ill effects on green monkeys, though in another species, macaques, it results in a fatal immune deficiency syndrome resembling AIDS. Some scientists believe the entire AIDS epidemic could have come from these monkeys. Farmers are re-

gularly bitten by green monkeys raiding crops.

FACT: No country has tested its entire population for AIDS so it is impossible to compile an accurate table of its incidence around the world. But based on official figures, these are the standings at the end of last year. The United States has 10.5 cases per 100,000 population; Canada 2.8; Switzerland 2.12; Denmark 1.82; Belgium 1.73; France 1.56; Netherlands 1.01; Iceland 1.00; West Germany 0.88; Luxembourg 0.75; Sweden 0.69; U.K. 0.69; Norway 0.57; Italy 0.52; Austria 0.48; Spain 0.46; Ireland 0.28. (This list represents only reported cases which double in number every six months).

FACT: Shaking hands, hugging, social kissing, crying, coughing, or sneezing will not transmit the AIDS virus according to most AIDS experts. Similarly you cannot get AIDS from toilets, doorknobs, telephones or household furniture.

FACT: Although the AIDS virus has been found in saliva, there is no

evidence that anyone has become infected with the disease after contact with saliva alone.

FACT: No one dies from AIDS, which is, technically, a syndrome which consists of a group of symptoms. People die of so-called "opportunistic infections."

FACT: In addition, to semen and blood, the AIDS virus has been found in saliva, breast milk and tears. Its distribution among high-risk groups shows that it is transmitted via blood and sexual intercourse.

FACT: More than 100 drug companies and 800 research units are searching for a cure for AIDS.

FACT: Children born to infected women are among the high risk categories.

FACT: The incubation period between infection and onset of the disease varies from nine months to six years. The average is 28 months. About half the sufferers die within a year of diagnosis of full clinical AIDS. Almost all are dead within two years.

AIDS

No cost is too high when lives are at risk

THE cost of fighting AIDS will be enormous. The cost of not fighting it will be higher.

But it is a delicate and difficult subject.

Although cancer has no sexual links, because it is often fatal, it too is something people don't generally like to discuss.

Any campaign to warn people about the dangers of AIDS has to be clearly thought out, striking, effective, even shocking—but it cannot be offensive.

Some have called for a campaign that will be explicit. They wish the Department of Health to openly discuss sexual techniques that might shock, horrify and offend many people.

This has been done, to some extent, in California, and other U.S. states. There, leaflets, and to a lesser extent, advertising hoardings, urge people and homosexual men in particular to employ "safe sex" in their relationships.

Other countries have urged the use of condoms for all engaging in casual sexual activity.

Campaigns of this type have offended not only Catholic Church leaders, but leaders of other churches and many ordinary people.

The only way to avoid AIDS, they say, is to avoid casual sex.

And it is true that to insinuate that there are no dangers attached to casual sex if a condom is used is foolish.

Some condoms have a failure rate — as a contraceptive — of one in ten. And while getting pregnant might be unfortunate, getting AIDS is fatal.

AIDS does not just affect the "guilty." There are innocent victims too.

A faithful partner can catch it from an unfaithful partner. A child can catch it from a mother, who, in innocence, may have caught it from her partner.

It is no good simply to say that AIDS is God's retribution.

Cardinal Basil Hume said: "Some people have claimed that the AIDS epidemic is God's punishment of a sinful world. It is better seen as proof of a general law that actions have consequences and that disorder inevitably damages and then destroys."

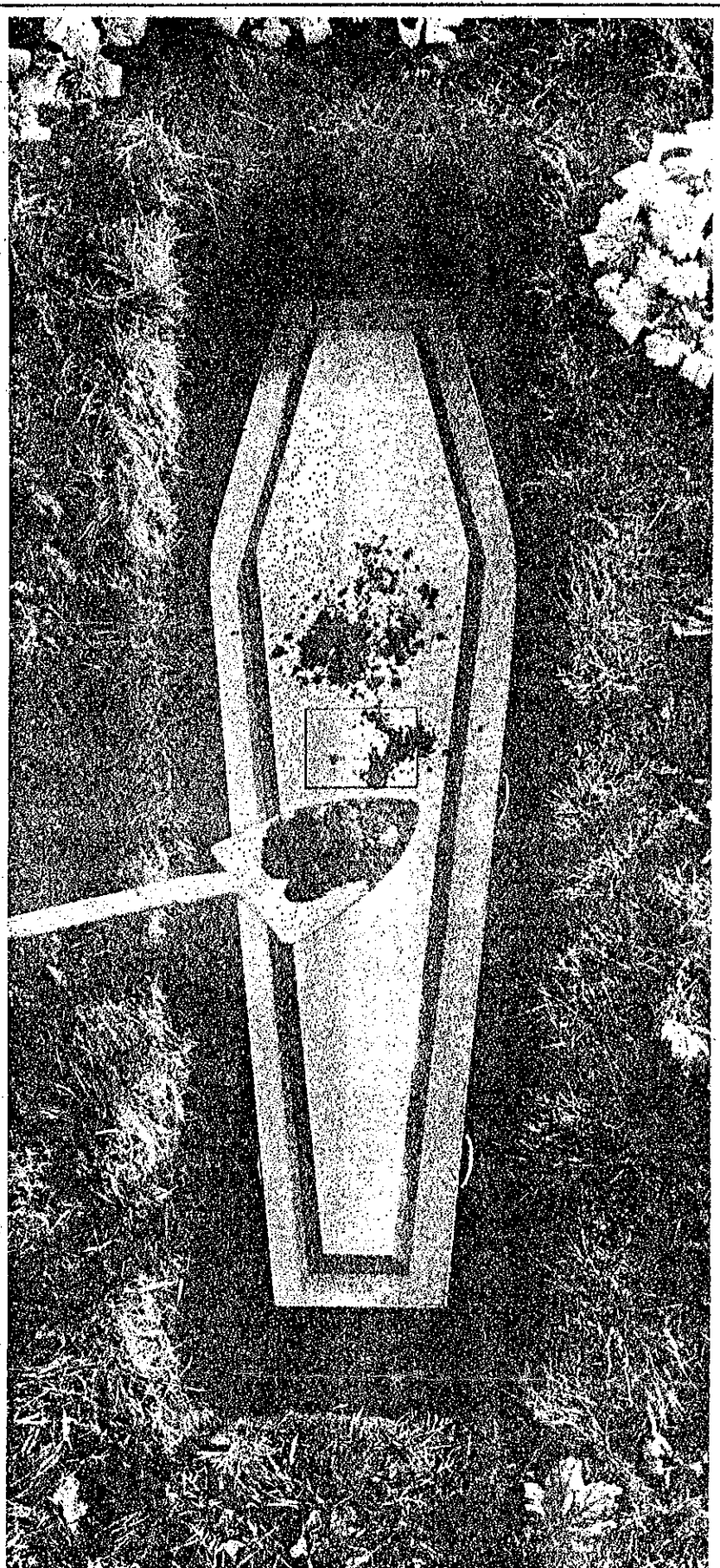
Wise words. But a campaign based solely on morality, or solely based on Christian or Catholic teachings, is doomed to fail. It would be seen simply as the churches preaching the same old message.

Certainly, morality, fidelity and responsibility should form the main basis of a campaign. But it is a campaign that should be based on commonsense, rather than on the teachings of churches.

The whole question is fraught with difficulties, moral, logistic, financial and medical.

That a campaign is necessary is not in doubt. That it must reach the greatest possible number of people as possible is obvious.

But it is so important, so absolutely vital for the future not just of Ireland but of the well being of the world that we cannot afford a botched second rate, penny-pinching job. It has to be done properly.



SOMETIMES, X DOES TAKE THE BIRTH MOVE.

CONTRACT AIDS YOU WILL
ST CERTAINLY DIE.

NO KNOWN CURE AND
THE HOPE OF FINDING ONE
AT LEAST TEN YEARS.

ANY WAY YOU CAN BECOME
INFECTED IS BY BLOOD OR SEMEN
FROM AN AIDS CARRIER.

SIMPLY THIS MEANS THAT YOU
CATCH AIDS THROUGH SEX.

ORAL AND VAGINAL SEX
THE HIGHEST RISKS, AND
THE DISEASE CAN LIE
HIDDEN FOR YEARS, YOUR

PARTNER MAY NOT EVEN
KNOW THAT THEY HAVE IT.

SEX WITH SOMEBODY TODAY
YOU ALSO HAVE SEX WITH
SOMEBODY THEY HAVE HAD SEX
FOR THE PAST SEVEN YEARS.

CONTRACTED, THE DISEASE
CAN BE PASSED ON TO YOUR NEXT
PARTNER AND, IF THAT'S A WOMAN,
TO ANY CHILDREN SHE

AIDS CAN SPREAD WITH LIGHTNING
SPEED.

IN THE UNITED STATES LAST YEAR
18,000 DIED.

WITHIN THE NEXT FIVE YEARS MORE
AMERICANS ARE EXPECTED TO DIE
OF AIDS THAN WERE KILLED IN THE
ENTIRE VIETNAM WAR.

IN BRITAIN, EXPERTS ESTIMATE 40,000
FATALITIES A YEAR WITHIN TEN
YEARS.

IRELAND IS NOT IMMUNE.

THE NUMBER OF AIDS VICTIMS
HERE, PER CAPITA, IS THE SAME AS
MOST COSMOPOLITAN SOCIETIES.

UNTIL THE FINAL, TERMINAL STAGES
OF THE DISEASE THERE IS NO
OBVIOUS SIGN THAT THE PERSON IS
AN AIDS CARRIER.

THE ONLY SURE WAY TO AVOID AIDS
IS TO AVOID CASUAL SEX.

SEXUAL INTERCOURSE BETWEEN
EVEN A STEADY COUPLE POSES A
RISK UNLESS THEY KNOW, WITH
ABSOLUTE CERTAINTY THAT BOTH
HAVE BEEN MUTUALLY FAITHFUL FOR
AT LEAST SEVEN YEARS.

USING A CONDOM MAY HELP TO
REDUCE THE RISK BUT EVEN THIS
IS BY NO MEANS CERTAIN.

AIDS.

IN A WORD, A DEATH SENTENCE.

AIDS

'You do not have to shock people with obscenity'

THE IRISH Government has been pondering the AIDS problem for a considerable time now. Still, the promised campaign has not begun. Advertising agencies are working on a campaign. But as it stands, we are one of the last countries to tackle the problem.

Last week the Evening Herald asked Gareth Oldham, managing director of Hunter Advertising to devise an advertisement for use in the media to warn about AIDS.

The advertisement on the left is the result.

Gareth headed a team of three which devised the advertisement ... "though it must be said, with a campaign of this sort, you tend to take input from the entire staff," he said.

"We first of all had to decide who we were aiming the ad at. We decided to forget the gay community. They have already undertaken a massive campaign which they have been running for some time and must, by now, be considered well informed on the subject."

"Haemophiliacs are in a different category. Their problem is strictly medical. So it is the heterosexual community we are aiming at."

There was no point, Gareth said, in offending people by describing in detail sexual techniques that many would consider perverted or at the very least unorthodox.

"We are simply saying that sex, and casual sex in particular, can kill. It covers all techniques. If you begin to describe them you will offend the people you are trying to reach and they will read no further."

"If you want to talk to people talk to them in a way they are prepared to believe. You do not have to shock with obscenity."

"Ordinary respectable people have affairs. They are the ones you are aiming at. They are not perverts, they are not sex maniacs. It is towards those people you aim your campaign."

"You must lead people into an ad. Hence the opening phrase 'Sex. Sometimes it does make the earth move.' That is designed to entice people to read on."

"And the advertisement is couched in terms that mean it is addressed to teach individual who reads it."

"It is not just a general ad aimed at the public in general. What it says is YOU can catch AIDS. YOU can die from AIDS. It is up to YOU to avoid it."

"And I feel that the message should — in addition to being widely advertised in the media — be printed on all airline and ferry tickets for people leaving Ireland."

"It's not that it cannot be caught here — of course it can — but there is a greater danger of infection through casual sex in other countries."

"This is not a job for committees of civil servants. Committees will never agree. They will be discussing a subject that is not close to their hearts."

"If the Minister for Health is serious about tackling this problem with a campaign, he should appoint someone to run it who already has a track record. He should appoint an achiever in the same way that Feargal Quinn was appointed to An Post and Michael Smurfit to Telecom."

"This question is so vitally important that it has to be left in the hands of an expert."

"Civil servants who have led cloistered lives will not mount an effective campaign."



Independent
12th January 1987

Right and wrong

Sir — The clearest thing that emerges from Mr. P. J. McGrath's letter of Jan. 6, is that a reader's expression of an opposing view to Mr. McGrath's makes one but a "critic" of Mr. McGrath's infallible pronouncements. He says I am unable to disagree with him without indulging in personal abuse. He must stand as an example of the truth of the adage that we are all inclined to accuse others of the faults we ourselves possess.

Mr. McGrath says that I suffer from such mental confusion that he considers it scarcely worth replying to me. Then he proceeds to give your readers what he terms his "reply".

He says that I think the Watergate scandal shows that academics are indifferent to morality. I had said that the President of Notre Dame University had said that Watergate made him conscious of the fact that everyone involved was a product of higher education who had not been trained to ask themselves whether their decisions were governed by right and wrong rather than trying to see if something different would work. It seems to me that the problem was higher education rather than academics alone.

Mr. McGrath says I claimed "that the results of the two recent constitutional referenda

somehow refute the views expressed in my (Mr. McGrath's) article". The tactic of pouring scorn on an opponent must be the oldest trick in the armoury of the Left.

I had said that "it is overdoing things for Prof. McGrath to lecture the Irish people". I quoted Mr. McGrath himself "The Department of Health is advocating the use of condoms in the fight against AIDS, not to change moral attitudes..."

Mr. Barry Desmond and his Labour Party were advocating their policy of condoms for teenagers before AIDS struck our society. They did not have to face the people on the issue because of the hunger for power of their fellow travellers in Government. But they had to face the people on abortion and divorce and received the public whippings to which I referred.

I do not envy Mr. McGrath his job of convincing the Irish people that all the carry-on about contraceptives, abortion and divorce was unrelated to a deliberate attempt to scuttle the moral attitudes of the majority of our people. Mr. McGrath's article was bashing a Bishop for daring to challenge Mr. Barry Desmond's claim for condoms as a curb for AIDS.

DONNCHA
MAC CARTHA
Bothar Reabolge,
B.A.C. 14.

AIDS scare Jocks a shock to the Highlands



"If he's got short hair and a sun tan, run a mile. Because what he's also got is AIDS. That's how I'm playing it anyway," said an Inverness disco girl at the weekend.

She was one of the 50,000 Inverness citizens who learned with shock and anger that the British Army may have imported the killer virus into their community along with 600 soldiers of the Queen's Own Highlanders returning from Kenya.

And a leading Kenyan newspaper, angered by a reported British Army decision to end training at a Kenyan resort because of AIDS risks, has urged retaliation against Britons, whom it said helped bring the disease to Africa.

"Why do we allow ourselves to continue to be insulted?" a Sunday Nation writer, asked in a column. "What is preventing us from curbing immigration into Kenya of British homosexuals, tourists, soldiers and their AIDS?"

In Britain, the army kept a cover-up on the danger for nearly a month while soldiers went on leave all over the Highlands.

The anger is by no means confined to the good-time girls of the discos. At Inverness infirmary Dr. James Dick said, "I am bound to feel that the Army has been irresponsible over this."

"They knew the danger before the First Battalion Queen's Own Highlanders went on exercise to Kenya, where the disease is rife. They warned the soldiers in advance about the dangers of going with prostitutes. Yet they meant to have them to go on leave for six days to Malindi on the coast,

where 65 per cent of the prostitutes are known to be AIDS carriers."

Although he is the Highlands Health Board's chief specialist on communicable diseases, Dr. Dick learned of the Army's plan to screen the Highlanders for AIDS only last Thursday.

At Fort George on the Moray Firth, the first battalion Queen's Own Highlanders is maintaining a security blackout.

Inverness is reported to be like a town struck without warning by a guided missile.

In three years the number of identified AIDS carriers in the town has been eight against 482 in Edinburgh and 59 in Dundee.

The Nairobi newspaper criticism followed a British Army decision to end training, including rest and recuperation, in the Indian Ocean resort of Malindi "because

of an identified health risk," according to a British Defence Ministry spokesman.

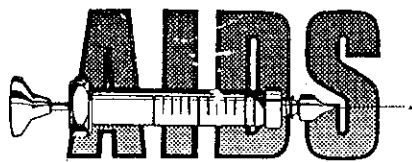
Forty of 600 troops from the Queen's Own Highlanders contracted venereal diseases after spending last month in Kenya.

The spokesman refused to comment on reports that the Parachute Regiment is presently training in Kenya has orders to stay out of coastal brothels and bars.

The soldiers, reportedly have been offered a game-viewing safari — "an offer which the troops are saying is no comparison to the sun, an beer sprays they normally relish," the Sunday Nation reported.

Some reports yesterday said the Highlanders had been advised to have tests for Acquired Immune Deficiency Syndrome. The incubable virus can take up to 12 weeks to show in the bloodstream.

The deadly virus that is causing fear throughout the world.



The lethal disease AIDS is causing increasing alarm throughout the world — particularly since it has become clear that it can no longer be dismissed as a "gay plague" or a consequence of drug abuse. In the first of four articles DR DAVID NOWLAN, Medical Correspondent, describes the virus which causes AIDS and explains the difficulties of developing a vaccine to repel it.

THERE IS a story current about a young Irish student who went to New York last summer to work. One evening, it is said, he met and rather fancied a girl with whom, eventually, he ended up in bed. The following morning when he awoke, she had upped and gone; and, ritten across the bedroom mirror was the message: "Welcome to the AIDS family."

When the student returned to Dublin he sought a blood test for antibodies against the virus which causes AIDS. It was positive. He had indeed been initiated into the "AIDS family", a group which is now growing rapidly throughout the world and whose members are increasingly meeting their deaths. The greatest numbers are in Africa. The largest local "branch" is in New York. But the family is known to have members in 71 countries and is presumed to exist in a great many more around the world.

The story about the student, which may be apocryphal although it was retailed to me as the truth, is one of the more ghastly from the current pandemic of AIDS. But it serves to make a few points which are pertinent at this stage. AIDS is no longer a problem of certain marginal sub-groups in society and can no longer be dismissed as a "gay plague" or a consequence of drug abuse. It can be contracted through casual heterosexual intercourse and it can be brought home with alarming speed.

In a mere five years from the time of its first being diagnosed, this incurable illness, the Acquired Immune Deficiency Syndrome, is filling thousands of column inches in newspapers all over the world, is causing almost unprecedented concern in the World Health Organisation and other health agencies, is the subject of a phenomenal amount of scientific research, and is now the most lethal concomitant of that activity which has been smiled upon for centuries — a young man sowing his wild oats.

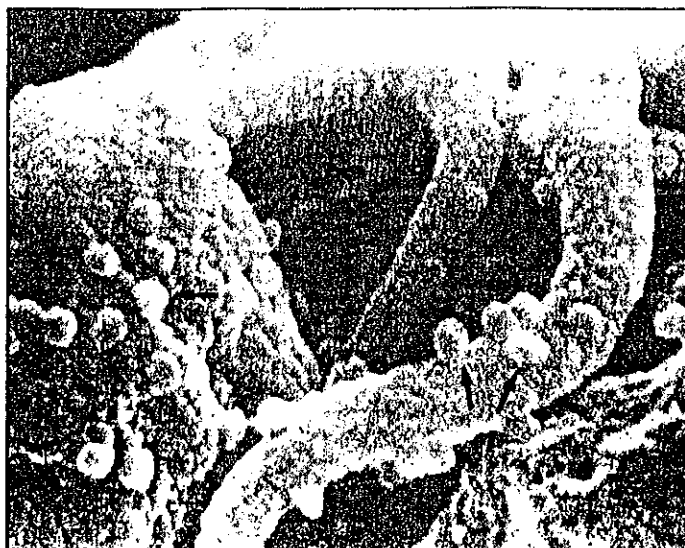
The first cases of AIDS were diagnosed in the United

States in 1981 by doctors who noticed a similarity of symptoms among a small group of homosexual men but did not know what might be causing these symptoms. It was two years later that a group of French biologists identified a virus which they labelled the Lymphadenopathy-Associated Virus, or LAV. Very shortly thereafter, American researchers identified what they labelled the Human T-cell Lymphotropic Virus, sub-species III (to distinguish it from two similar viruses already known), or HTLV III.

It was finally agreed, after a spate of unseemly scientific rivalry between the French and American workers, that these two viruses were one and the same, and in May 1986 the International Committee on the Taxonomy of Viruses recommended the name that is now generally accepted: the Human Immunodeficiency Virus, or HIV. Despite the discovery by the French scientists of an apparently new variant which they called LAV II (a variant which has been isolated mainly in Central Africa but also in a few cases in Europe thought to have originated in Africa), the name HIV seems to be here to stay and variants hereafter will, presumably, be called HIV II, HIV III and so on. Because of the nature of the virus it is indeed likely that further variants will indeed be discovered.

HIV belongs to a class of viruses known as retroviruses which use a special enzyme called reverse transcriptase to enable them to imprint their own reproductive genetic information on to the genetic code in the human cells which they invade. The enzyme is significant because some efforts to find a treatment for AIDS are now being directed towards drugs which might block this enzyme (I will return to that in a later article). When the virus's genetic material is imprinted on to the human cell's code, that cell can then be triggered to reproduce more and more viruses.

The HIV particularly targets certain of the white blood cells which comprise



HIV, the AIDS virus, infects a T-helper cell, an essential part of the immune system. Viral particles — arrowed — are released by budding through the cell membrane.

part of the human body's defence mechanism against infections, and it may also target certain cells in the brain or central nervous system (which can give rise to a particularly nasty form of AIDS which I'll mention in the next article). The defence cells which HIV heads for are known as lymphocytes. The cells in the immune system (as the defence system is called) whose normal task is to identify foreign invaders of the body and to manufacture antibodies against them which, in most instances, repel the invaders or render them inert.

Among these lymphocytes are cells called T-lymphocytes and their associated T4 helper cells. While the HIV may invade several different kinds of lymphocyte, its primary target is the T4 helper cell, which has been described as a kind of roving "mission control" in the immune system, signalling the other lymphocytes that an invader is present and mobilising some to produce antibodies against that invader and others to move to attack and engulf the invader. HIV takes over the T4 helper cells and thus disrupts communication within the system, not quickly enough to prevent the manufacture of antibodies but efficiently enough to prevent that antibody from damaging the virus.

The virus may then "sleep" for a while in the invaded cells. But sooner or later — possibly when the immune system is called into action against some other infection — the invaded cells are activated. Far from attacking the virus they actually reproduce more of it and, because the whole system of communications is disrupted, the cells are unable to fight off the

other infection either. Hence, one of the main manifestations of AIDS is the occurrence of conditions which, in normal circumstances, the human body would have had no difficulty in overcoming — unusual pneumonias, odd skin cancers, parasitic infestations of the body or fungal infections of the mouth or elsewhere. In most cases, it is the inability to fight off these other infections which leads to death.

WITH A virus that can so comprehensively disable the immune system, and actually use it to reproduce itself, it is hardly surprising that AIDS is a difficult condition to treat.

Viruses are not susceptible to antibiotics, and those few drugs which have been developed in an effort to combat other viruses may act to stimulate the immune system. But with HIV in the system this may only increase the numbers of the virus already in the body. It may be best, while the molecular biologists and others are trying to unravel all that, to seek a vaccine which might prevent the invasion in the first place by triggering antibody production before the live virus itself has entered the body.

But there are difficulties here too. One of the characteristics of the retroviruses is their capacity to alter their outward chemical appearance.

It is this outer chemical coat, or envelope, of any invading organism which the body's immune system first recognises and against which it manufactures antibodies. Thus, if the chemicals of the envelope can be introduced (as they would be in a vaccine made up of killed viruses, for instance) the immune system can create antibodies against them, and these antibodies will be in the body for all time to repel invasions. That is the basic principle upon which all vaccines or immunisations work.

The Human Immunodeficiency Virus, however, has the ability to alter rapidly the chemicals of its outer coat and thus escape detection and attack. And that is why it is proving difficult to manufacture a vaccine against HIV: researchers must try to identify some core of chemicals which always appear in the HIV envelope and use some synthetic form of these as the basis of a vaccine to stimulate antibody production, or else they must somehow manufacture a synthetic vaccine which would stimulate the production of antibodies to attack the inner core of the virus.

While there are some small signs of encouraging work towards one or another of these goals by genetic engineering techniques, there is far to go — probably the best part of a decade — before an effective HIV immunisation can be manufactured, tested and brought into safe and effective use.

Meanwhile, more and more people are being exposed to the virus, and more and more of those exposed are going on to develop AIDS. And AIDS, for the reasons just stated, is still incurable.

Nobody knows precisely how large the "AIDS family" now is. The best estimate by the World Health Organisation in mid-1986 was that there were at least 100,000 cases of full-blown AIDS in the world, about half a million people with symptoms of HIV infections that did not (not yet anyway) amount to the full-blown disease, and probably 10 million people carrying the HIV antibodies which indicated that they had been exposed to the virus. The numbers in all categories are multiplying daily.

The Acquired Immune Deficiency Syndrome is now probably the greatest single disease threat to humanity since smallpox (although, to keep it in some perspective, it has still not killed anything like the numbers that are killed annually by such old enemies as measles and gastroenteritis which decimate Third World children each year). Yet, even without a cure and without a vaccine, AIDS can be prevented. As the US Surgeon-General said, the vaccine in this case is information and education. And the need for this is urgent.

Tomorrow: How the disease spreads



Organisations large and small, public and private, are producing educational materials about AIDS, but much more is needed

SV



TODAY SPECIAL REPORT ON THE PLAGUE THREATENING

A million dead

Computer gives grim forecasts on killer disease

BY the time the government finds out if its Aids information campaign is successful, it could be too late.

Within five years a million people could be carrying the killer virus.

And if that happens there could be a million deaths by the year 2000.

It takes about five years for someone who has the Aids virus to develop the full-blown disease.

And there is no way of knowing how many people are now spreading the virus — we can only count the number who are in hospital or dead.

by CHRISTOPHER MONCKTON

Suppose the government's campaign is no more successful than similar publicity in high-risk areas of the United States, such as San Francisco and New York.

In that case, the number of infected people will go on doubling every ten months.

By 1991, when the first Aids patients infected this year start going into hospital, as many as

1,500,000 people in Britain could be carriers.

It is hard enough trying to stop the spread of an infection which the DHSS thinks may already have reached 30,000 to 40,000 people.

But by 1991, unless the government's campaign is brilliantly successful, the problem will be around 40 times worse than now.

And because the Aids virus mutates at great speed, some scientists fear it could "learn" to survive better as it passes from person to person and may one day become as easy to catch as a cold.

Experts paint gloomy picture

So what chance is there of the government's expensive campaign making any difference?

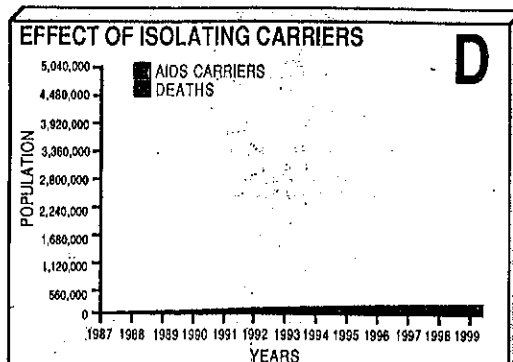
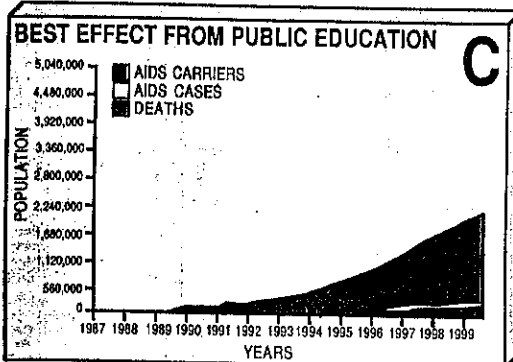
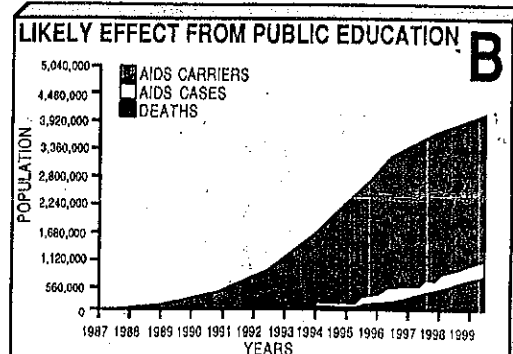
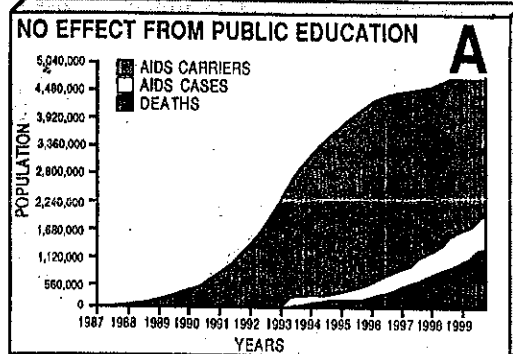
I put this question to Dr Everett Koop, the US Surgeon-General, who has recently issued several million booklets warning Americans about Aids.

He said: "We've got to do it — it's my constitutional duty as Surgeon-General of the United States to tell people what the dangers are. But I'm very worried."

"I have been running campaigns against smoking, drinking and drugs for years, and they haven't worked. So I am not hopeful about the chance of persuading people to change their sexual habits."

Other American experts paint an even gloomier picture.

Jonathan Tennenbaum, a physicist, has developed a computer model to forecast how quickly Aids could



TODAY, MONDAY, JANUARY 12, 1987

TO AFFLICT NEARLY EVERY FAMILY IN BRITAIN by 2000 if we don't act NOW



THE WAY AIDS MIGHT SPREAD

Mid-year	Cumulative Dead	Hospital Cases	AIDS Carriers
1987	350	390	38,000
1988	750	850	74,000
1989	1,700	1,900	140,000
1990	3,700	3,900	270,000
1991	7,900	7,700	450,000
1992	16,000	14,000	740,000
1993	31,000	26,000	1,100,000
1994	58,000	44,000	1,700,000
1995	100,000	71,000	2,200,000
1996	180,000	110,000	2,600,000
1997	290,000	160,000	2,900,000
1998	450,000	210,000	3,100,000
1999	660,000	260,000	3,100,000
2000	900,000	300,000	3,000,000

• Figures assume a steady fall in the rate of spread as a result of the Government's publicity.

spread. His estimate, on the assumption that public education will have no effect, no cure will be found and the US government avoid tough action, is as follows:

"By the year 2014, more than 80 percent of the US population is either infected, sick or dead. Dismal as it may appear, this scenario errs on the conservative side."

He has also forecast what happens if public education is successful.

'Isolation would cut the toll'

Even then, 70 percent of Americans could be carriers, patients or dead by 2014. This forecast, he says, "illustrates the folly of proposals to curb the epidemic by 'safer sex'."

But if Aids carriers were put into isolation, fewer than 15 percent of the population would become infected by 2014, he predicts.

In London, a team at Imperial College is more optimistic.

They suggest the march of the virus could be halted very quickly if the public — particularly high-risk groups such as homosexuals and drug users — heed the government warnings.

Health Secretary Norman Fowler says that by 1990 there will be around 4,000 Aids deaths.

But, as TODAY exclusively revealed on Friday, Dr Hilary Tillet, a leading statistician at the DHSS Communicable Disease Surveillance Centre in London, says there could be up to 25,000 new cases within five years.

This is right in the middle of the DHSS range of 30,000 to 40,000.

Aidswatch supports Norman Fowler's estimate that 4,000 people will have died of Aids by 1990 and confirms Dr Tillet's warning that there could be 25,000 more cases by 1991-92.

Graphs A to D, generated by Aidswatch, show how the disease may spread in Britain until 2000.

• Graph A is the "worst case" forecast, assuming the publicity campaign has no effect and infections continue to double every 10 months.

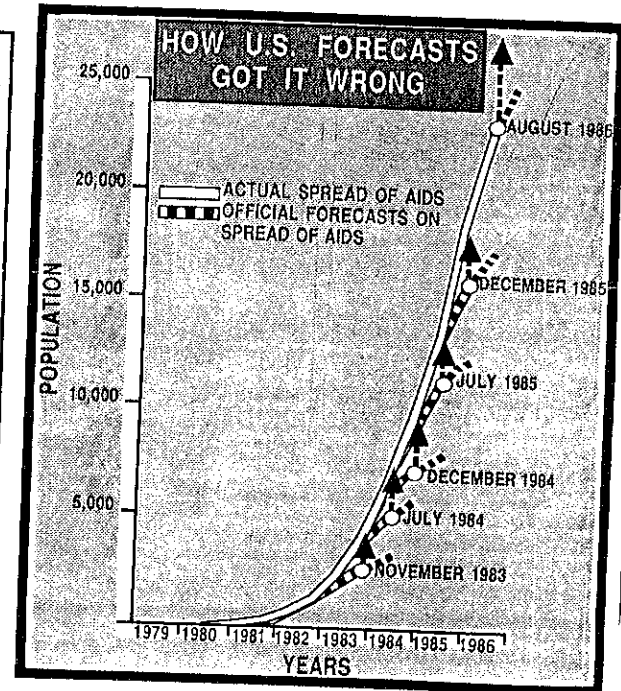
Though the graph stops in 2000, a continuation suggests a tenth of the population would be infected by the year 2014.

• Graph B is the "likely outcome" forecast. It assumes that the rate of spread would slowly come down in response to the government's campaign.

Even so, almost a million people would have died by 2000.

• Graph C is the "best case" forecast, assuming the doubling-rate would lengthen from 10 months to 20 months from the beginning of this year as a result of the government's campaign.

Even on this assumption, by the year 2000 there would be more than 300,000 people dead, 100,000 in hospital and two million infected.



• Graph D shows what would happen under regular blood testing, leading to the isolation of four-fifths of all carriers, assuming the rest avoid detection.

On this basis, by the year 2000 there would be 87,000 deaths — more than half of them coming from those who already have the virus now — almost 9,000 people in hospital and 120,000 infected.

Decisive action needed now

The results show that decisive action by the government in the next year or two could prevent hundreds of thousands of infections.

If tough measures are not taken, the disease could spread alarmingly in the next 10 or 12 years.

On the assumption in Graph B

that the government's campaign is moderately successful, by 1990 there will be more than 850,000 people infected, 3,750 hospital cases and a total of 3,750 deaths since the outbreak of the virus.

By 1993, well over a million people will have the virus, 25,000 will be in hospital and 31,000 will have died.

By 1997, almost three million people will be carriers, well over 150,000 will be in hospital and almost 300,000 will have died.

By 2000, the number of carriers will have stabilised at three million, but there will be 300,000 in hospital and almost a million will have died.

• Copies of the Aidswatch program, for IBM and compatible computers, are available from Chipmunk Software, 71 Albert Road, Richmond, Surrey, TW10 6DJ, at £12.95 each post free.

Today
12th January 1987

Figures that point the way

THE Aidswatch computer model generated graphs A to D on the following assumptions:

Eight percent of the population, on the "fast track" for infection, are in the high-risk groups (nearly all homosexuals, with a few drug users and their contacts), and the rest of the population are on the "slow track".

Among the fast-track population, the number of infections in graph A doubles every 10 months, but doubles more slowly from 1987 onwards in graphs B to D.

The doubling-rate on the slow track is every 100 months in graph A and still slower in graphs B to D.

In graph D, 80 percent of carriers are isolated, so from 1987 doubling-rates are 50 months (fast track) and 500 months (slow

track). The average period from infection to full Aids is six and a half years and the average period from Aids to death is 12 months.

Of Aids carriers, 75 percent will get full Aids. All of those will die.

One percent of fast-track infections will pass into the slow track, and vice versa.

The first infected person, from a high-risk group, came to Britain at some time in 1974.

The calculation is done in four stages:

● For each month, the number of existing carriers on each track is multiplied by the coefficient of infection which is derived from the preset doubling-rates.

● The calculation of cross-infection between the two groups is done and the figures for new infections in each group are reduced by the ratio of still-uninfected people to total population because a smaller uninfected population means there are fewer people who can be infected.

● To iron out the statistical "transients" caused by the long and variable period from infection to full Aids, the figures for new infections are cast forward using a mathematical formula to simulate a normal-distribution bell-shaped curve between the moment of infection (ie the current month) and the maximum

period to full Aids.

● A similar casting-forward of full Aids cases in the current month is done to yield deaths in future months.

It must be stressed that no model can come close to mirroring the complex pattern of human behaviour which leads to the spread of infection. The model cannot predict anything more than very rough and ready figures.

Yet it does have its uses. It knocks on the head some of the more alarmist forecasts that have been made, and the trial-and-error methods it allows give a reasonable indication of the factors crucial to esti-

imating the future spread of Aids.

The monthly doubling-rate, particularly in the fast track, is very important.

Even small variations in this rate produce large variations in the number of infections.

Vital

This justifies vigorous public education about the dangers of Aids.

The percentage of carriers who will get full Aids is important because the lower the percentage the higher the number of carriers to spread the disease.

The exact size of the fast-track population is vital.

The smaller the high-risk population, the less chance the virus has of taking root in the general, low-risk population.

The rate of cross-infection between the fast track and the slow track is perhaps the most important figure of all.

If this figure is set at three percent or more, there is a serious danger that the traditional "S-curve" of infection shown in these graphs will turn into the less familiar "piano-lid" curve of a second-stage growth in the spread of the virus as it takes hold in the general population.

It is this terrifying possibility that prompted Dr Tillett, in the secret memorandum exclusively revealed in TODAY last Friday, to talk of "an enormous epidemic in the long-term future".

Tomorrow: what steps the government — and the rest of us — urgently need to take

THE WALL STREET JOURNAL, MONDAY, JANUARY 12, 1987

ICN Pharmaceuticals' Data On AIDS Drug Is Criticized

By MICHAEL WALDHOLZ

Staff Reporter of THE WALL STREET JOURNAL

NEW YORK—ICN Pharmaceuticals Inc. thought it was announcing good news about treating acquired immune deficiency syndrome, or AIDS.

Instead, the Costa Mesa, Calif.-based company's Friday news conference in Washington provoked criticism, dismay and a big drop in its share price.

ICN released preliminary data from a year-long study suggesting that its anti-viral drug Virazole is effective in treating an early form of infection with the AIDS virus. The company told a packed gathering of journalists and securities analysts that the study, involving 163 patients, indicated that the drug prevented the development of AIDS in some patients suffering from a very early form of the disease. It would be the first drug to show such an effect.

While some AIDS researchers said the company's announcement is encouraging and indicated that Virazole deserves greater study, they called the study's results released Friday "sketchy," "inconclusive" and "premature."

Aims Are Questioned

Several physicians who treat AIDS patients were dismayed that the company released the early data to the news media, a move they fear will ignite unwarranted expectations among their patients and others at risk of developing the fatal disease. "One needs to question the company's motivation for calling a press conference and then releasing such inconclusive results," said Donald Abrams, assistant director of the AIDS clinic at San Francisco General Hospital.

ICN said it had to release the information because it is material to the company's financial prospects.

The news announcement fueled speculation among some AIDS specialists that ICN issued the data to pressure the government into quickly approving the drug for use against the AIDS-like condition that affects many people who are infected with the AIDS virus but haven't developed the disease. The company hasn't asked the U.S. Food and Drug Administration to approve the drug, but sources close to the company said it had,

hoped the FDA would attend the news conference and allow certain patients with the early AIDS symptoms to receive the drug free if their doctors made a so-called compassionate-use application to the agency.

But FDA officials said they hadn't had enough time to review ICN's data. They said the agency will rule on the issue after the company makes a formal request that it do so.

Fall in Stock Price

Meanwhile, ICN investors who had expected even better news from the news conference—perhaps hoping for some FDA recognition—reacted sourly. In New York Stock Exchange composite trading Friday, ICN's shares tumbled \$4 after the news conference to close at \$21.25 on 3.6 million shares traded, after opening the day up more than \$1 and after rising \$3.125 in trading Thursday. In national over-the-counter trading, Viratek Inc.—the company that is 50%-owned by ICN and is developing Virazole—fell \$5 a share to \$71.

The shares of ICN and Viratek have been on a roller coaster since last year because of rumors about the effectiveness of Virazole. The anti-viral drug, also known as ribavirin, is approved for use in aerosol form for treating a lung ailment in infants. The drug, which appears to block a virus's ability to reproduce in cells, also is being tested as a treatment against influenza.

At the news conference, ICN officials reported on one of two studies that the company conducted on people with AIDS-related complex, a set of symptoms similar to AIDS that often develops into the disease. Of 52 patients who received 800 milligrams of Virazole a day, none progressed to AIDS. But 10 patients of the 56 who received a placebo developed the disease. Six of 55 patients who received 600 milligrams of Virazole also progressed to AIDS.

But some AIDS specialists said the data given to the news media were too limited to draw conclusions. "It's encouraging that they saw some effect," said Paul Volberding, who runs the San Francisco General clinic. "But we need to know much more," he added.

Independent
13th January 1987

AIDS scares off Kenya's tourists

HUNDREDS of West Europeans are cancelling holidays on Kenya's coral-reefed coast for fear of AIDS, a leading Kenya newspaper reported yesterday, quoting hoteliers who blamed ill-informed Western press reports.

"Following the widespread publicity on the alleged increase of AIDS cases, particularly in Mombasa and Malindi, hundreds of tourists booked for coast beach hotels have cancelled bookings," the Daily Nation reported.

It quoted hotel operators saying an alleged campaign to discourage tourists from visiting Kenya was having catastrophic effects.

"Fifty per cent of all our

bookings have been cancelled," one manager said. "I've been here 11 years and I've never had a worse high season," Chris Modigell, general manager of Jadini Bcah Hotel, said.

But a duty manager at the Mombasa Beach Hotel said he had had no cancellations and there were Swiss and German tourists in his hotel.

"As far as we're concerned, there's nothing like incidence of AIDS reports being made in Europe," he said.

Joshut Mwendwa, coast chairman of the Kenya Association of Hotel Keepers, said: "If the current campaign continues, it is likely to have some

adverse results."

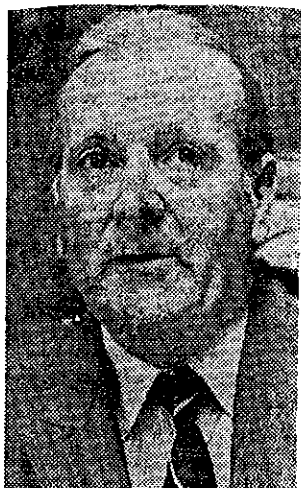
He called on the government to issue a statement to counter negative reports.

Cancellations followed the banning of British troops training in Kenya from the major resort towns of Mombasa and Malindi after 40 of 600 of a Highlands regiment contracted venereal diseases last month.

But Modigell said he believed the British reports only had aggravated a series of reports published in West Germany and Switzerland which were scaring tourists away.

"I wish people would realise that as long as they don't go out with prostitutes, they're not going to get AIDS," he said.

Independent
13th January 1987



Dr. Austin Darragh.

AIDS: clinic wins drug contract

By LIAM RYAN

A DUBLIN research clinic has won a multi-million dollar contract for managing the development of a new drug aimed at controlling the effects of the AIDS virus.

More than 60 patients have already taken part in experiments with the drug and preliminary results are reported to be "extremely encouraging," according to the head of the clinic, the Institute of Clinical Pharmacology (ICP) based at St. James's Hospital.

ICP chairman Professor Austin Darragh said last night the drug was designed to restore to the human body the capabilities of fighting AIDS, other viruses and certain forms of cancer.

He added that there was evidence that the immunal deficiency created by AIDS was completely reversed in the short-term by the new drug, which has not yet been named.

Prof. Darragh pointed out that a team of ICP scientists in Dublin, New York and Nashville are now reviewing the latest data and preparing a report on it.

The ICP's contract is with an American pharmaceutical company and Prof. Darragh said the "importance of this project to mankind cannot be over-stated."

He said that with its chain of monitoring centres in Europe, America and the Far East now functioning, ICP was uniquely prepared to conduct this critical programme on a world-wide basis.

The ICP pointed out that tests carried out so far had been in America, but more were to be done in Europe and most probably at the ICP clinic in Dublin.

Prof. Darragh said the newly-developed drug had been used on both patients with ARC (Aids Related Complex) and AIDS victims, "with a very encouraging series of results."

But he said it must be stressed that these were short-term and in no way must it be assumed that "we are talking about a cure."

Prof. Darragh said that the drug was aimed at successfully controlling AIDS, which would allow people with AIDS to live a very normal, healthy existence for a natural length of time.

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Irish Independent



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BIGGEST DAILY SALE IN IRELAND

Restraint only true AIDS safeguard—bishops

THE CATHOLIC bishops warned last night about the grave danger of encouraging the use of condoms for combatting AIDS and stressed the only true safeguard is self-restraint, and faithfulness inside marriage.

In their first official statement in the controversy, the bishops argued that promoting the use of condoms as an anti-AIDS method could actually result in an increase in the number of victims. And they said Ireland could be on the edge of an AIDS epidemic.

● Irish clinic wins multi-million dollar contract — Page Two.

The bishops said: "Apart from other moral considerations, there is the grave danger that the promotion of condoms will give further encouragement to permissiveness, and this in itself would contribute to a further spread of the disease."

They pointed out that the only reliable safeguard against contracting the virus by sexual means is through faithfulness to one's partner in marriage and through self-

denial and self-restraint outside of marriage. "It is vital that this be made crystal clear," added the statement issued after a meeting yesterday of the Standing Committee of the Bishop's Conference.

The statement stressed that the danger of an epidemic makes the prevention of the spread of the disease imperative. It would be sad if the response to this major threat were to be reduced simply to a debate about free needles or easy availability of condoms, commented the bishops.

"This would be an evasion of the issues," they continued. "The issues

involved are much more fundamental and need to be honestly addressed."

"It is widely accepted that we could be on the edge of an epidemic of AIDS in Ireland. It can scarcely be denied that its alarming, worldwide spread is to a large extent a consequence of actions and behaviour which have their roots in moral disorder."

The bishops pointed out that as a matter of urgency they had asked their Pastoral Commission to make recommendations on practical measures which the Church in its own ministry should take to help AIDS victims.

The bishops' statement continued: "The response to the threat of AIDS requires, in the first place, a compassionate and caring attitude towards those who are its victims. We must strive to carry out Christ's work of caring and healing. To people with AIDS we should respond as we would to anyone suffering from serious or terminal illness."

It is within the drugs culture that AIDS is most prevalent in our country, said the bishops. There must, therefore, be a more active programme of education towards the prevention of drug abuse.

Good Christians won't get AIDS

BRITISH Junior Health Minister Mrs. Edwina Currie stepped into the AIDS debate yesterday saying that "good Christian people" would NOT catch the disease.

Speaking to Mersey Regional Health Authority in Runcorn, she said: "My message to the businessmen of this country when they go abroad on business is that there is one thing above all they can take with

them to stop them catching AIDS — and that is the wife."

"If business people think that they can go to some of the countries where AIDS is rife and have a "good" night out and pick up a local girl, then they may bring home more than they bargained for," she said.

She said she was worried that attention to the screening of immigrants and to deaths among male homo-

sexuals ignored the fact that AIDS was rife among the heterosexual community and among prostitutes in some parts of the world.

"If a businessman wants to make sure he doesn't get AIDS, I hope he doesn't forget the leaflet as he unpacks his suitcase," she said.

"It applies to all the young lads who are busy planning their summer holidays. They will have a

wonderful time and with a bit of luck, and a bit of hand-holding, they will all come back like they went.

"The tragedy is that we have to challenge people's standards and behaviour. We have no choice — we have to make that challenge.

● Only 20 people are known to have AIDS in the Soviet Union and all but one of the victims are foreigners, Russia said yesterday.

Weather
Bitterly cold.
Snow showers.
Severe ground
frost.
Full details Page 2

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Air fares
ad banned
by RTE
—Page 3

Vol. LVI No. 11

Tuesday, January 13, 1987

The Truth in the News

C PRICE 45p

Bishops give an Aids warning Condoms 'a danger'

By RAY BURKE

THE CATHOLIC Hierarchy yesterday criticised suggestions that the use of condoms might help to halt the spread of the killer virus, Aids.

In its first official statement on the issue, the Hierarchy warned that "there is the grave danger that the promotion of condoms will give further encouragement to permissiveness and this in itself would contribute to a further spread of the disease."

It also urged that "the only reliable safeguard against contracting the virus by sexual means is through faithfulness to one's partner in marriage and through self-denial and self-restraint outside of marriage. It added: "It is vital that this be made crystal clear."

The Department of Health is to launch a major campaign later this month warning of the danger of Aids. It is believed to advocate the use of condoms.

The statement from the Hierarchy, issued at a meeting of the Bishops' conference, said it was now widely accepted that we could be "on the edge of a pandemic of Aids in Ireland" and described as "imperative" the need to prevent the spread of the virus.

It said that the first response to the threat of Aids should be "a compassionate and caring attitude," but it noted: "It can scarcely be denied that the alarming spread of the disease is a direct consequence of a breakdown in moral order."

The statement drawn up by the four Archbishops and ten Bishops who make up the standing committee, also called for prayers that there will be a strong moral response to the disease and that society may be saved this dreadful disease.

It pointed out that Aids "is a major threat to public health and that there was no cure for the killer disease. It would be a tragedy if the state went on, "if the many social and religious response to this major threat needs caused by Aids."

● Drug to fight AIDS — Page 3

were to be reduced simply to a debate about free needles or easy availability of condoms. This would be an evasion of the issues. The issues involved are much more fundamental and need to be honestly addressed."

The Hierarchy noted that Aids was most prevalent in this country among drug abuse and it said that the human and financial resources to be allocated to combating the abuse of illegal drugs. It also said that Aids victims should be treated with compassion and sympathy and not as "anyone else suffering from serious or terminal illness."

However, the statement went on to warn that the extent of the spread of the disease is a direct result of the abuse of sex and that this abuse "can be lethal."

The statement also praised the work of the Bishops' standing committee, also called for prayers that there will be a strong moral response to the disease and that society may be saved this dreadful disease.

It pointed out that Aids "is a major threat to public health and that there was no cure for the killer disease. It would be a tragedy if the state went on, "if the many social and religious response to this major threat needs caused by Aids."

Drug to fight AIDS

By DAMIEN McHUGH

A LETTER of intent has been signed by the Dublin-based Institute of Clinical Pharmacology to enter into a multi-million dollar contract with an American pharmaceutical company to develop a drug for the treatment of AIDS and various forms of cancer.

Stressing that the drug was not a cure for the disease, Prof. Austin Darragh, chairman and chief executive of ICP, said it offered tremendous hope to AIDS sufferers. "The importance of this project to mankind cannot be overstated," he said.

More than 60 patients have been given the drug on a trial basis and preliminary results are reported to be extremely encouraging, with no evidence of toxicity due to the treatment, according to an ICP

statement yesterday.

A team of ICP scientists from Dublin, Nashville and New York are currently preparing a report on the trials.

Further tests will be carried out in the U.S. and in Europe within the next few days to determine the efficiency and side-effects of the drug, which according to Prof. Darragh, is designed to restore to the human body the capability of fighting the AIDS and other viruses as well as certain cancers.

He said yesterday that the drug had been used clinically particularly in the cancer field alone and with a combination of other drugs for over two years. Experience had been developed about the relative safety of the drug as compared with other anti-AIDS

medicines. It had been used very encouraging results on AIDS sufferers.

"It must be stressed that these were short term and in no way must it be assumed that we are talking about a cure," said Prof. Darragh on RTE radio.

"We do not have the capabilities of determining whether the AIDS virus has been eliminated from the body," said Prof. Darragh, adding: "There is evidence that immunal deficiency created by the AIDS virus is completely reversed in the short terms by this drug."

He said the drug offered "tremendous hope" for the future for AIDS sufferers provided it was not misused. It should be available within the next two years.

SW

Irish firm to test AIDS drug

By Dr David Nowlan,
Medical Correspondent

AN IRISH medical research company is to organise international clinical trials of a drug which may offer some hope of treatment for the Acquired Immune Deficiency Syndrome (AIDS).

The trials, which will involve about 1,000 in the first instance and may last for some years, will be worth several million dollars to the Dublin-based Institute of Clinical Pharmacology which yesterday announced that it had signed a letter of intent to enter into the research contract with an American pharmaceutical company. The research will probably be conducted in Texas and Washington in the US and perhaps in London, Brussels and Amsterdam in Europe.

Dr Austin Darragh, chairman and chief executive of ICP, said in Dublin yesterday that the project represented the most important and exciting activity ever undertaken by his company. The drug to be tested has been used to treat certain cancers during the past six or seven years and has been tested in 60 patients with AIDS for a short period of time in recent months. The results from these short-term trials in this small number of patients have been sufficiently encouraging to warrant more extensive long-term trials, and these should start,

under ICP supervision, early in February.

The substance under trial was developed in Philadelphia in the US and is known as a "mismatched double-stranded RNA" (Ribo-Nucleic Acid which, as it happens, is also the core molecule of many viruses). It is one of several hundred substances currently under investigation as possible treatments for AIDS, but it is one of the most promising.

There are two basic requirements of an effective AIDS treatment. One is that the virus which causes the disease should be eliminated from the body or, at least, prevented from reproducing itself. The second is that the patient's damaged immune defence system should be restored to as near normal as possible.

Up to now, most testing had been done on azidothymidine (AZT) and ribavirin, but the former had proved very toxic, its recipients requiring massive blood transfusions, and neither, as far as this correspondent is aware, had proved efficacious in repairing the damaged immune system.

Although the mismatched double-stranded RNA has only been tested for short periods in a small number of AIDS patients, it has, so far, proved apparently free of toxicity and, most importantly, has also reduced the numbers of viruses detectable in the patients' blood and has restored

certain crucial functions of the immune system. It is believed to act against the virus by blocking an enzyme (reverse transcriptase) which is essential to the virus's reproduction, and to repair the immune system by stimulating the production of interferons and interleukins by the white blood cells.

The US Food and Drugs Administration has, therefore, called for more extended clinical trials of the substance in patients with AIDS, and the drug's developers in Philadelphia have called in ICP to organise and supervise these trials. It is hoped to have the trial protocols completed for submission to the FDA by January 26th and to start trials on February 9th in Texas and Washington.

Already, three major multinational pharmaceutical companies are vying for a stake in the substance. But it is far too early to say whether or not it will prove a breakthrough in the treatment of AIDS. AZT also looked promising on the basis of its earliest clinical trials.

● A French-made spermicide that has been on the market for several years has been found to kill the AIDS virus without causing harmful side effects, a scientist at the Pasteur Institute in Paris claimed yesterday. It was believed to be the first non-toxic substance that could be used locally to stop the spread of the virus, he said. — (UPI)



Dr Austin Darragh

SL

Breakthrough...to kill virus

A FRENCH-MADE spermicide that has been on the market for several years has been found to kill the AIDS virus without causing harmful side effects, a scientist at the Pasteur Institute in Paris claimed yesterday.

It is believed to be the first non-toxic substance that can be used locally to stop the spread of the deadly virus.

Research showed 10 minutes of contact at body temperature with a small amount of benzalkonium chloride "is enough to render the AIDS-causing virus totally in-

active," said Dr. Jean-Claude Chermann.

Chermann is one of France's leading experts on AIDS and was a member of the Pasteur research team that first isolated the virus in 1981.

The spermicide has been used for several years in a variety of French contraceptives, including creams and condoms, and has been exported to Canada, Spain, Switzerland and Africa.

Studies on its use against AIDS began when the inventor of the

spermicide discovered it prevented many common infections.

"I became persuaded that it was not only a spermicide but also killed bacteria and viruses. My patients had practically no infections," said the inventor, Dr. Pierre Longlois.

No cure has been found for AIDS, which attacks the victim's immune system, leaving it defenceless against disease.

And yesterday the British Government began delivery of leaflets to all 23 million homes in Britain warning against the spread of AIDS.

AIDS

Sir, — Dr Joe Hendron, the SDLP's spokesman on health, has dismissed the British Government's attempt to deal with the problem of AIDS as promoting "farmyard morality." I think his remarks are intolerant and show a complete disregard for moral pluralism. Coming from any public representative the monumental naivety of such remarks would be worrying but coming from a medical practitioner who practises his profession in an urban community they are utterly astonishing. One can imagine the outcry there would be in this country if a British politician cast a similar smear on the social policies of an Irish government.

The approach which the British Government has chosen to take is, I believe, the only option available to a secular society such as modern Britain with its variety of religions, cultures and moral attitudes. As such the approach adopted is to be commended for its sheer realism. In such a society moral strictures of the type suggested by Dr Hendron simply won't work. Nor will they work in this country either. Because, whilst this country is less secular than Britain, the fact remains that a large and increasing number of people, particularly young people, are refusing to be bound by moral strictures such as those of Dr Hendron and are choosing their own code of sexual behaviour. And this seems to be true — regardless of people's professed religious beliefs.

When Dr Hendron states that the campaign suggests that "once you had a condom, promiscuity was all right" he misrepresents the moral position inherent in the approach adopted. The campaign merely informs people of the fact that the risk of AIDS is greatly reduced by the use of condoms and then leaves people to make their own moral decisions.

The implications of Dr Hendron's remarks for this country are, as Mary Holland has already pointed out in *The Irish Times* (December 16th), ex-

tremely worrying. For it would appear that the approach of legislators in the Republic may well follow the Hendron line. This will consist of stating the Catholic position on extra-marital sex followed by the burying of heads in the sand for a period and then when the problem escalates hands will be raised in horror.

There is another, broader, respect in which Dr Hendron's remarks are disturbing. As an SDLP spokesman his position on this issue is unfortunately rather typical of the position taken by so many other Irish nationalist politicians on issues of private morality, generally. Despite high-sounding platitudes about pluralism and the need to accommodate different beliefs, these politicians always revert to a strictly orthodox Catholic position on the issue of sexual morality. It would seem that just as the cult of violence is the skeleton in the cupboard of extreme republicans so Catholic sectarianism is the skeleton in the cupboard of constitutional nationalists. It is a skeleton which Irish nationalists would do well to exorcise. I feel that an appropriate response could be made by the leadership of the SDLP by dissociating itself from Dr Hendron's remarks. — Yours, etc.,

FRANK FALLS,

5 Oakfield Estate,
 Oranmore,
 Co Galway.

TUESDAY, JANUARY 13, 1987

No. 40,653

2

The only reliable safeguard against AIDS was faithfulness to one's marriage partner and sexual abstinence outside marriage.

Text of statement: page 7.

The only reliable safeguard against contracting the virus by sexual means is through faithful abstinence to one's partner in marriage and through self-denial and self-restraint outside of marriage.

Paying tribute to medical personnel, prison officers, chaplains and others who minister to those suffering from AIDS and their families, the bishops said the more needs to be done. They called for a united effort on the part of leaders in the community to respond to the many social and religious needs caused by AIDS.

Mr Morris said he agreed that honesty was required in dealing with the subject, but the Church

(Continued on page 7)

«Continued on page 71»

Times
13th January 1987

Aids hotline opened to fight fears of infection

By Craig Seton

An Aids telephone hotline was in use within minutes of opening in Birmingham yesterday when a woman caller asked if sharing a toothbrush put her at risk of catching the disease.

The confidential telephone advice service, known as Lifeline, has been established by the Birmingham City Council and district health authorities to allay fears about how Aids is spread. Sixty volunteer counsellors will man six telephone lines between 1pm and 10pm every day at an office in the city.

Birmingham council has put £10,000 into the venture, which is intended to clear up confusion about the disease rather than act as a specialized counselling service for those considered most at risk.

The telephone call from the woman with the toothbrush was answered by Dr Jennie Carpenter, district medical officer for east Birmingham, and one of the volunteer counsellors, who told the anonymous caller that there were no known cases of the disease being passed on by a shared toothbrush. But she said sensible hygiene suggested that sharing was not to be recommended.

Another caller asked if she should continue to have social contact with homosexual friends. Dr Carpenter said: "I told her that she could not get the disease by social contact alone."

There have been 13 cases of Aids and nine deaths in the West Midlands, and a further 252 people have been identified as carrying the virus.

Dr Rod Griffiths, co-ordinator of the scheme, said: "For people who want a confidential service, there will be doctors, nurses, psycholo-

gists, health education officers, health visitors and other trained personnel at the end of the line."

Mr Hugh McCallion, chairman of the city council's environmental health committee, said: "There is a lot of confusion about what Aids is and how it is spread. The aim of our Lifeline is to give people the facts and simple advice. There will be no preaching."

The telephone number of the Lifeline is 021-235-3535.

● The first of the Government's leaflets warning of the dangers of Aids should arrive in homes today.

The Post Office is confident that the two-week distribution of 23 million leaflets, entitled *Aids: Don't Die of Ignorance*, will not be affected by the current cold weather. "We have got a good record of coping with bad weather, I don't foresee any problems," a spokesman said yesterday.

The distribution is being handled through the household delivery service, in a special operation for delivering unaddressed items along with ordinary post.

The Government Aids warning will arrive inside envelopes bearing the message: "This leaflet is being sent to every household in the country to inform everyone about Aids, in order to help stop the spread of this serious disease. It deals with matters of health and sex that may be disturbing. Please make sure that everyone in your household who may need this information sees this leaflet."

Another one million leaflets will be distributed in main post offices later this month. A postmark bearing the slogan, "AIDS: Don't Die of Ignorance", will soon be stamped on letters at sorting offices.

5

Today
13th January 1987

AIDS OPEN LETTER TO NORMAN FOWLER

Don't let us die from your inaction

Dear Norman,

IF immediate and determined action is not taken to halt the spread of the Aids virus in Britain, several hundred thousand people could die of it by the year 2000.

As I reported in TODAY yesterday, with your present policies as Health Secretary the disease could spread very rapidly in the next 10 years.

And if that rapid spread is allowed to continue, there is a real danger that the epidemic will spill over from homosexuals and drug-users into the rest of the population.

Explicit warning of this threat has been given to you by Dr Hilary Tillet, a senior statistician working at the Communicable Disease Surveillance Centre at Colindale in North London.

Yet the government has so far responded with a decidedly limp, though undoubtedly expensive, public education campaign, and has not been frank enough to share with its electors the advice of its own experts.

Epidemic

The truth, spelt out bluntly in Dr Tillet's report, is that "we must consider the implications of an enormous epidemic in the long-term future".

My recommendations to you are these:

- Britain is a democracy, governed by the people, so tell the people the truth. It is only when we understand the full danger that we will, perhaps, be stirred to change our behaviour as far and as fast as is necessary.

- You cannot responsibly rely solely upon a campaign of advertisements and leaflets to meet the threat posed by Aids. Use some of your £20 million public relations spending money to encourage people to get themselves blood-tested voluntarily.

- Give everyone whose blood-test shows negative a stamped and dated "Aids-free" card, complete with photograph, if he or she wants one.

- Use some more of your public relations cash to tell those who know they are carrying the virus that they should not, under any circumstances, have sexual contact with uninfected people.

I recently watched a TV programme in which an Aids carrier cheerfully admitted continuing to sleep around because he always used a condom. The only safe way to prevent the spread of the virus is to avoid sexual promiscuity altogether.

- Use still more publi-



FOWLER: Tell the truth

city money to emphasise that moral behaviour is also safe behaviour. Your existing campaign appears to take it for granted that sex is a purely mechanical function. There is more to it than that.

- Plan an immediate, compulsory blood-test of the entire population. You cannot expect to contain the spread of Aids unless you know how many carriers there are.

The present cost of taking and analysing a blood test for Aids is £1.25. Assuming that the cost would be halved if tests were carried out on a national scale, one test on a population of 56 million would cost you £25 million.

Vital

That is a lot, but not compared with the £2,500 million cost of keeping 100,000 Aids patients a year in hospital, which could otherwise happen well before the end of the century.

- A second national blood test, a year after the first, would give vital information about how fast the virus spreads.

Without these two national tests, you will have no way of knowing whether the virus is still spreading at a dangerous rate until those who become infected this year begin to go down with the Aids disease itself.

That will be in five years' time: and by then, if the US experience is anything to go by, up to 1.5 million Britons could be infected.

Remember the wise words of Stanislaw Lec: "Actions left undone often lead to a catastrophic lack of consequences."

Don't let us die of inaction.

Yours sincerely,
Christopher Monckton

SW

Today
13th January 1987

WRITE HERE

Get tough or Aids will win

WHILE I'm astounded that some television viewers were baffled by such deep symbolism as exploding volcanoes and tombstones, I too would prefer harder-hitting Aids advertisements.

We're facing the greatest health catastrophe of the century and it's no time for the rantings of the moral majority.

Health experts must give us the facts, no holds barred. If this means hitting us below the belt, so be it. All is fair in the war against this plague.

Wayne Atkinson,
Chelsea, London

Don't panic

IT'S a sad reflection on how far we have progressed in the fight against Aids — nowhere, it seems — that the public needs to be reassured that Princess Diana is safe meeting victims.

How can people be so

ignorant, so hysterical, as to think the Princess will catch the deadly virus just by being in the vicinity of patients?

Like Professor Adler (TODAY, January 10), I hope Diana's visit does help demystify Aids. Such a plague in the late 20th century is terrifying, but public panic just makes matters worse.

Jane Dickson, Bath

Good thinking

YOUR reporter Craig Brown (TODAY, January 6) disparaged the idea that Marlborough College should employ a clinical psychologist.

It would appear that the college is attempting to take a most responsible attitude to its pupils by providing a wide range of advice, help and services.

Rather than poking fun at a headmaster who is attempting to come to

terms with the real problems faced by children, it would have been more helpful had you tried to encourage other heads to follow the example.

Stephen White,
Information Director,
British Psychological
Society, Leicester

Seeing red

LONDON Transport has been using posters to advertise fare changes. In my opinion, these are misleading.

They have an almost equal number of red triangles (denoting price increases) and yellow triangles (denoting no change or a price decrease) mixed into the table of fares.

The travelling public at first thinks there is a roughly even chance they might have a cheaper fare. In fact, only one fare structure drops in price — children travelling

WRITE TO
● The Editor
TODAY LETTERS
70 Vauxhall
Bridge Road
London SW1V 2RP



TOO SOFT? Norman Fowler leads the campaign

across all zones in one day, down a measly 10 pence to 70 pence.

All other fares either stay the same or go up. I wonder how many people are in the increased categories compared to those with unchanged fares?

David Carlton,
Battersea, London

What a guy!

YOUR showbusiness editor certainly took the bull by the horns in his article on "Gorgeous George" Hamilton (TODAY, January 10).

He is absolutely right to be amazed that any woman could take seriously a man who says: "A woman is like a violin. Played properly, she can make sweet music."

I wonder what Liz Tay-

lor wants. Surely not more giant diamonds after her years with Richard Burton? Spare us.

George said it — he's "one hell of a guy".

Fiona Wilson,
London W14

Acting up

GOLLY, Olly, it's good to hear you're still around (TODAY, January 9).

Oliver Reed often has asked for a hard time at the hands of the press. Yet I've always enjoyed his acting, both on the screen (which is among the very best) and on the stage of life — particularly the latter.

What's wrong with a bit of earthy irreverence? I hope age doesn't stop Olly offending us.

S R Hill, Wimbledon

5

Bishops blame sex abuse

(Continued from page 1)

had been deficient in this in its dealing with sex, particularly homosexuality. It was factually incorrect to say that the only method of ensuring safety was confining oneself sexually to the marriage partner. There could be safe sex in a stable monogamous relationship.

Mrs Patsy Buckley, of SPUC, said that while the organisation would not have a formal response to the bishops' statement, her own personal response was one of agreement. "It's very good that they've given a statement and I agree that it shouldn't come down to a debate about free needles and condoms."

Mrs Alice Glenn agreed wholeheartedly with the bishops' statement. "There is a positive cure for AIDS," she said, "man's respect for himself and his fellow human beings, which is chastity before marriage and fidelity throughout the married state."

She said that the permissive society had created hardship for young people, and that it had taken the AIDS epidemic to show people that the laws of God were the laws of love and respect. "It's a case of having to appear to be cruel to be kind and loving by putting restraints upon mankind."

Catholic bishops urge united effort on AIDS

THE CATHOLIC bishops yesterday called for a united effort to respond to the "many social and religious needs caused by AIDS," and said it would be sad if the response to this major threat were "to be reduced simply to a debate about free needles or easy availability of condoms."

A statement issued yesterday by the Standing Committee of the Bishops' Conference said:

It is widely accepted that we could be on the edge of an epidemic of AIDS in Ireland. This deadly virus is a major threat to public health. AIDS is a human disease which kills and for which there is no known cure. It can scarcely be denied that its alarming worldwide spread is to a large extent a consequence of actions and behaviour which have their roots in moral disorder.

The response to the threat of AIDS requires, in the first place, a compassionate and caring attitude towards those who are its victims. We must strive to carry out Christ's work of caring and healing. To people with AIDS we should respond as we would to anyone suffering from

serious or terminal illness.

The Christian community must be a sign of Christ's love, especially for the marginalised and the suffering. As a matter of urgency, the Bishops' Conference has asked its pastoral commission to make recommendations on practical measures which the church in its own ministry should take to help AIDS victims.

The danger of an epidemic makes prevention of the spread of the disease imperative. It would be sad if the response to this major threat were to be reduced simply to a debate about free needles or easy availability of condoms. This would be an evasion of the issues. The issues involved are much more fundamental and need to be honestly addressed.

First there is the question of drug abuse. The abuse of drugs has a tragic moral, personal, family and social consequence and the whole community should be alive to the danger it poses to society. It is within the drug culture that AIDS is most prevalent in our country. There must, therefore, be a more active programme of education towards the prevention of drug abuse. There are many people who devote themselves to the care and treatment of drug abusers, and their work deserves the support of the whole community. More human

and financial resources need to be allocated to this work.

In regard to AIDS, we must be equally conscious of the grave dangers posed by the abuse of sex. With the advent of AIDS, this abuse can be lethal. The precious gift of sexual love is reserved in its full expression for the life-long, life-giving, exclusive union of two people in marriage. Outside of this union, it is abuse of God's gift. Apart from other moral considerations, there is the grave danger that the promotion of condoms will give further encouragement to permissiveness and this in itself would contribute to a further spread of the disease.

The only reliable safeguard against contacting the virus by sexual means is through faithfulness to one's partner in marriage and through self-denial and self-restraint outside of marriage. It is vital that this be made crystal clear.

We pay tribute to the chaplains, doctors, nurses, prison officers and others who minister to those suffering from AIDS and their families. But more needs to be done. We, therefore, call for a united effort on the part of leaders in the community to respond to the many social and religious needs caused by AIDS.

We should not depend on human effort alone. We ask you people to pray that there will be a strong moral response to the challenge posed by this crisis and that society may be saved from this dreadful disease.

City 2

Money Mail

An AIDS cure would mean a crock of gold

IT MAY NOT BE the most cheerful of topics, least of all when spirits are already depressed by the weather, but the time has come for the City page to talk about AIDS—not just a fleeting or furtive reference but frankly with no holds barred.

The question is, simply enough, what are the investment implications of the disease?

Some firm, somewhere, sometime, will come up with an effective cure and it could prove the ultimate crock of gold—unless, perhaps, some rival firm promptly produces another cure which is cheaper or more effective.

Investment analysts range up and down the list to the world's leading drug firms; but at the moment they cannot spot the probable winner or winners. There is no cure as yet,

though Wellcome has, in AZT, a promising start. AZT will go before the Federal Drugs Authority in the U.S. at the end of the week. It is likely to get authorisation, not because it is a particularly safe drug but because it is hard to see how the FDA, in the present climate of opinion, could hold out against it.

The drug is used for treating a particularly serious type of lung disorder resulting from AIDS. The hope is that Wellcome will be able to develop a way of treating lesser cases with lower doses later on.

Brokers Kleinwort Greaveson point out in their latest investment research on the sector that there are three products made by U.S. firms which are in the final stages of development: Isotretinoin (Newport Pharmaceuticals), Raltegravir (Eli Lilly) and AL721 (Praxis Biologie). Kleinwort predict that the initial market for



The City Editor's Column
ANDREW ALEXANDER

each of these products could be as big as £100m.

But these remain drugs for treating people who are suffering the Aids symptoms. A very big market indeed could develop if something were found to treat the people infected by the virus but not yet suffering from AIDS itself.

However, that is still some years away. By 1991, using existing therapies, Kleinwort guesses that the U.S. market could involve an annual turnover of \$3bn. But as with so much in this field, the guesses are difficult. It may turn out that the disease develops even after the virus has been in the system for five years. The importance of diagnostic testing hardly needs to be stressed—and this is in itself a big market. Currently U.S. firms dominate this particular area.

The thought should not be ignored that much of the research which

will be done in pursuit of AIDS therapy may provide new insights into viruses and enable some drug companies—though few can guess which at this stage—with useful therapies against them as well.

Of course, prevention is as important as cure. And here at least it is possible to target a company: the London International Group, the leading condom producers. Only 20pc of LIG sales are accounted for by condoms at present. But it underpins the business which made £24m in pre-tax profit in 1986 and put the shares on a price-earnings ratio of 20. The shares do not look all that costly.

Wellcome's shares by contrast may look a bit expensive and have certainly proved volatile of late. The prospective P/E ratio for 1987 is a high 26 on expectation of profits of £156m. But as the AIDS problem mounts, I would expect any share with an AIDS premium to perform well.

And it could even be, such are the ways of markets, that high ratings for drug firms looking into AIDS will spill over to drug firms in different fields. At any rate the sector remains attractive.

Independent
14th January 1987

AIDS: Kenya 'smeared'

KENYA'S Health Minister said yesterday that Kenya was the victim of a smear campaign suggesting falsely that visitors to the country faced a high risk of contracting AIDS.

"There is no need for panic", said Peter Nyakiamo in a statement responding to news reports in Europe about the presence of AIDS in Kenya, a popular des-

tination for European tourists.

The reports included newspaper articles saying the British army had declared Mombasa and Malindi off-limits to soldiers training in Kenya because of fears they could get AIDS from prostitutes there.

"There is no scientific basis for the hysterical and alarmist media presentation that Mombasa and Malindi constitute a source of AIDS

in Kenya," Mr. Nyakiamo said.

Mr. Nyakiamo said 250 cases of AIDS have been recorded in Kenya and 38 of the victims have died.

● Paula Yates controversial sex chat show has been postponed yet again — partly because of the growing threat of AIDS.

The production team have asked Channel 4 for more time to work on the series.

Independent
14th January 1987

Expert on AIDS says condoms are 'no danger'

By WILLIAM DILLON

ONE of Ireland's leading AIDS experts has clashed with the Catholic hierarchy over their claim that the use of condoms would further spread the killer disease.

Dr. Derek Freedman, chairman of the Society for Sexually Transmitted Diseases, said that though such may be the bishops' belief, he knew of no scientific or objective study to show it.

On the contrary condoms were a very reliable way in heterosexual sex of avoiding infection from AIDS and the other sexually transmitted diseases, he maintained.

Dr. Freedman said that a survey last week of a group of Danish prostitutes who consistently used condoms with their clients showed that none of them were infected. A similar study of German prostitutes had shown a similar finding. Such people had "ample opportunity" to become infected, he added.

"A big problem is drink. People can learn everything about avoiding infection and go out with the best of intentions, but then they forget."

In their statement on AIDS, the bishops warned that apart from other moral considerations, there was a grave danger that the promotion of condoms would give further encouragement to permissiveness and this in itself would contribute to a further spread of the disease.

Dr. Freedman said the advice and guidelines given to people by the bishops was very good, but it did not necessarily work for everybody. The Department of Health had to take steps to protect people who might not be listening to the bishops.

Independent
14th January 1987

British campaign too late' 'too little'

THE British AIDS campaign was described yesterday as "too little, too late" by England's first regional co-ordinator.

Dominic Davies, newly appointed Mersey health authority AIDS co-ordinator, accused the government of only taking action when it was clear it was threatening the heterosexual community.

Mr. Davies (27), a counsellor from the University of Leicester, had a three-year contract to spearhead an AIDS training and information service in Merseyside and Cheshire.

So far seven people have died from AIDS among the Mersey region's 2½ million population, and it is estimated that 3,500 people will become infected and 140 cases will be reported in the area in 1988.

Mr. Davies said: "I think the Government campaign is too little, too late. There have been over 300 people who have died of this disease already, and another 300 we know about are living with it at the moment."

Mr. Davies aims to call a conference of education directors and head teachers to try to develop AIDS teaching as part of health education in schools.

"It is vital to reach the young who are the ones who have most sex, and so are most at risk," he said.

SL

Independent
14th January 1987

The HEB
campaign
can hardly
avoid the
condom issue

Whatever its
final shape,
the AIDS
campaign will
be attacked



AIDS DON'T DIE IGNORANCE

[GAY OR STRAIGHT, MALE OR FEMALE, ANYONE CAN GET AIDS FROM SEXUAL INTERCOURSE. SO THE MORE PARTNERS, THE GREATER THE RISK. PROTECT YOURSELF. USE CONDOMS.]

LAST Friday officials from the Health Education Bureau and the Department of Health met for a confidential get-together at the offices of the Bureau in Dublin's Upper Mount Street.

They were there to study a detailed presentation from three of the country's leading advertising agencies.

The agencies — Doherty Advertising, Bell Advertising and O'Kennedy Brindley — outlined how they would handle the lucrative if controversial account for the Government's proposed anti-AIDS campaign, which is due to begin at the end of the month.

The initial budget could be in the region of £250,000—but if necessary up to £1m, could be made available.

After listening to the presentations, the officials present favoured giving the account to Doherty Advertising, although the dotted line has yet to be signed to seal the contract.

The letters inviting the presentations were only sent out on December 22, which would suggest something of a rushed last-minute anti-AIDS campaign.

There is little doubt but that Health Minister Barry Desmond would have liked to have moved sooner with this controversial campaign, but for various reasons was unable to. One possible reason is that a dithering HEB had not finalised its plans earlier.

It is understood that the Department of Health had written to the bureau as far back as last February suggesting that it get involved in preparing for such a campaign, but urging that this be done in conjunction with the department.

The letter was discussed again at the December meeting of the board and since then bureau officials have been working feverishly with the department in finalising a joint programme.

This is to be a major "public information campaign" but it can hardly avoid the contentious issue of whether or not condoms should be used to prevent the spread of AIDS.

Mr. Desmond has gone on record as saying that the campaign would include reference to condoms, but will he still be a Minister when the campaign gets going?

Whatever the final shape of the campaign it will be attacked from a number of areas over the highly-controversial condoms question.

On the one hand the Irish Family Planning Association says that it would be "suicidal" not to stress the importance of condoms in this campaign, but any such reference, no matter how obliquely,



AIDS, health ... and sexual mores



By John
Walshe

will in turn be criticised by the Catholic bishops and various Church-linked groups.

The bureau has been collecting information on the AIDS problem from other countries and consulting with various experts on the issue over the past year.

The main public involvement by the bureau to date has been fairly minimal—a general information leaflet and a grant of about £800 to a gay rights group.

One source admitted last night that the bureau and board members had already ~~condemned this assistance given to the gay group~~.

"Can you imagine what the reaction

will be like when the main campaign gets under way," said the source.

The HEB is already embroiled in significant controversy over its life skills sex education programmes and is obviously uneasy about being the target of further abuse.

Its various recent controversies arising out of "sexual politics" in Ireland is a far cry from the days when the bureau and the then Health Minister Charles Haughey mutually helped one another to a major national profile as a result of a variety of "healthy living" programmes.

The Bureau was set up under a 1961 Health Bodies Act but it really did not achieve a separate existence until 1978.

As Health Minister, Charles Haughey recognised its potential both for public and political good. He bumped up its budget and got plenty of easily-earned publicity for the Bureau's "healthy living" campaigns.

But it was when it got involved in sex education, or as it is coyly termed "relationships and life skills education," that the Bureau began to run into controversy.

It was accused of using techniques tried and discarded in the U.S. Initially, the bureau was somewhat dismissive of the accusations. But the criticisms have taken on a momentum of their own and now many parents are convinced that their children are being somehow subjected to psycho-therapy in classes by teachers who will not impart a moral dimension to their subject.

The bureau is at last fighting back against some of the wilder claims but they have lost a lot of ground.

The Bureau's recent survey on parental attitudes to sex education has not done much to lower the temperature in the debate. But Minister Paddy Cooney's draft guidelines are likely to take much of the heat out of the situation.

The guidelines could not be clearer: parents have a right and a duty to provide sex education for their children and the schools' role is to supplement this work.

"In doing so it should be clear that it is the school which is fully responsible for the education which it provides and there can be no question of any supporting agency or person taking over such responsibility from the school," say the guidelines.

The "supporting agency" is obviously a reference to the Health Education Bureau. It might be taken as putting the bureau in its place. But the bureau, which was consulted about the guidelines, will almost certainly welcome them.

Paddy Cooney has in a sense done the HEB a favour—by taking it out of at least one of its recently entered tight corners.

5

Letters

Fighting off AIDS

Sir — As everybody knows by now the AIDS threat is beginning to reach very serious proportions. It is probably the most serious disease to hit mankind since the Black Death in the middle ages.

Unlike most other diseases this present affliction is a sexually transmitted one but is now capable of being spread by blood transfusion which has made many people worried. The seriousness of the situation has prompted the British Government to embark on the so-called Anti-AIDS advertising campaign. This campaign is supposed to warn people of the danger of AIDS but in fact does the very opposite.

In addition this is a further example of the lengths certain groups will go to in order to promote the spread of promiscuity.

By telling people to use condoms if they must indulge in illicit sexual activity they are both promoting immoral behaviour and helping spread this deadly disease even further as there is no sure way to prevent the spread of the disease except to act in a responsible manner with regard to sexual matters.

Our own Government is set to unleash a similar advertising campaign here and this sort of campaign would be in keeping with the present Government's all out efforts to rid this country of everything we hold dear morally.

They have shown this by their clear contempt

for those who refuse to accept the result of the condom as valid. I now about the use of condoms.

We are told are in a period of freedom, that we are an enlightened age, we must accept that our young are more broadminded and liberal-minded than our fathers and were before us.

I would like to know where this liberal attitude taken in 1987? The answer can be found if we look at the amount of credentialed teenage pregnancies around us like number of which are taking and of the widespread breakdown of marriage.

We see the super film stars who marry the sixth, seventh, maybe tenth time, to our eternal shame we are entertained by these sort of people, immoral behaviour, these same "Stars" on and off screen, lovely examples of young people.

It is no wonder that we have the situation today with AIDS spread. The Church has been damned because it spoken out against latest campaign, nobody in power see path we are taking, doom? Sadly they can't.

PATRICK BYRNE
Kiltegan,
Co. Wicklow.

AIDS and the Bishops

At the beginning of the eighties AIDS was unheard of; today five to ten million people worldwide are carriers of the virus and the numbers grow daily. In his series of articles in *The Irish Times* this week, Dr David Nowlan describes AIDS as "probably the greatest single disease threat to humanity since smallpox." Appreciation of the full extent of the AIDS epidemic is only beginning to dawn on many ordinary people — as is the realisation that it is no longer only homosexuals and drug abusers who are at risk. With an effective vaccine and cure probably years away, the prospect of millions of deaths may now be real.

For the foreseeable future, there are only two effective approaches to the problems presented by AIDS; first, there is the urgency of prevention through public education and awareness programmes; secondly, there is the importance of developing a humane and caring approach to those afflicted by the disease and facing death.

In this respect the statement by the Catholic bishops this week has given a good headline. The approach to AIDS victims must be to "carry out Christ's work of caring and healing," the bishops say; a "compassionate and caring attitude" must be adopted towards victims. This is a Christian and responsible approach by the Hierarchy, particularly when set against the reaction towards AIDS of other churchmen in many parts of the world. Only last week, a New York priest refused to marry an AIDS victim in the city's cathedral.

Interestingly, too, the bishops stopped short of issuing an outright condemnation of the use of condoms to prevent the transmission of AIDS. The only really effective prevention, they argue, is chastity. The thinking may be somewhat naive. But given that Catholic teaching is totally opposed to the use of condoms it is interesting that the bishops held back from specifically reiterating the sinfulness of condoms on this occasion. In this regard their statement is markedly more restrained than that of some of the British Catholic bishops, for example.

The bishops have spoken out and expressed their concern, as well as their intention of developing a pastoral response to AIDS victims. The civil authorities should take note; action from that quarter has been slow in coming. Where are the leaflets, the posters, the preventive advice? The launch of the Health Education Bureau's programme — which must surely be the frontline of any preventive campaign — needs to be speeded up. AIDS is a serious epidemic and has to be treated as such. There is little point in launching a preventive campaign after thousands more have contracted the virus; it is needed now.



Doctor stresses need for condoms in AIDS fight

THE CATHOLIC Hierarchy's advice on how to cope with AIDS was valid and important, but condoms should be available for those who did not accept that view, Dr Derek Freedman, chairman of the Society for Sexuality Transmitted Diseases, said yesterday in Dublin.

On Monday, the Standing Committee of the Bishops' Conference said that the only reliable safeguard against AIDS was faithfulness to one's marriage partner and self-denial outside marriage.

The bishops said that the promotion of condoms would give

further encouragement to permissiveness and this, in itself, would contribute to the further spread of the disease.

Dr Freedman said he supported the view that by staying with one partner a person would not be infected. This was a valuable and important message, "but we do not live in an ideal world" and it was important that condoms were available for those who did not accept such teaching.

Dr Freedman also said that there was no scientific evidence to the effect that the availability

of condoms promoted promiscuity and lead to the spread of AIDS.

The State had a duty to protect all people, particularly those at risk, as there were people who did not accept the Church's message.

He added that Ireland had the second highest number of babies born in Europe with the AIDS virus, because of the large number of parents abusing drugs.

Women with AIDS positive antibodies must not become pregnant and contraception should be available to them, he added.

comharba é ar an gCaptaen Seán Ó Donnagáin.

Aois na hÓige

IS ÓG agus is óg a théann údair na Gaeilge i gcló, a saothar ina leabhar. Níl an ceathrú céid ag Mícheál Ó Conghaile, ach ba é an t-éagarthóir ar "Gaeiltacht Rath Cairn" agus ar an leabhar amhrán "Croch Suas É". Tá leabhar staire ar a cheantar dúchais, "Conamara agus Arainn 1880-1990" ag na foilsitheoirí. Éiríonn an chéist an dtéann buanú an chló ar shaothar óigfhir ar bhealach cinéal "previous"; an chaoi leis sin a thástáil, ar ndóigh, na leabhair a léamh.

Cnuasach gearrscéalta leis an údar chéanna atá os ár gcomhair, dar teideal "Mac an tSagairt"; Cló Iar Chonnachta a d'fhoilsigh an 77 leathanach ar £3.50, bog. Níor dheacair cás a dhéanamh go bhfuil an gearrscéal, macasamhail an dáin, á shaothrú go tréan sa Ghaeilge, as coibhneas do ghoile an phobail. Ach an áit a bhfuil aon fhoirm ealaíne á cleachtadh go rathmhar, is mithid a moladh. Cad é ár meas ar an seacht scéal seo, ó ceithre leathanach d'fhad go trí leathanach déag iontu.

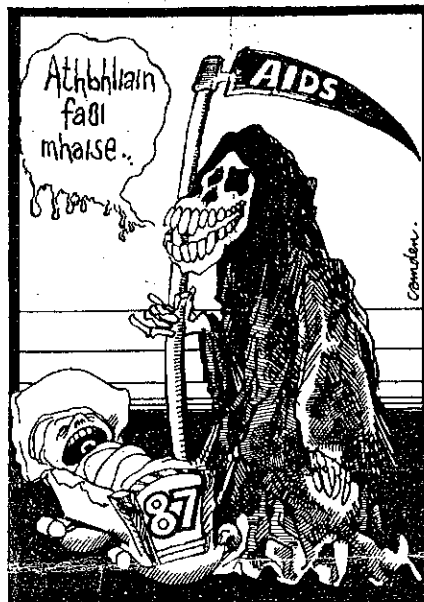
Agus muid ag cuimhneamh gur saothar óigfhir é seo, is aisteach a choimeádaí agus a chleachtar an cheird. Is mó d'Ó Flatharta a chímí ná d'Ó Faoláin, agus níl tionchar Mhic Mhathúna ná na ngearrscéalaithe trialacha Galltachta le feiceáil ar chor ar bith.

Tuairisceoireacht ar tharlachaintí nádúrtha agus cóiltra tuaithe orthu atá ar siúl ag an údar seo. Ní miste sin mar shaothar printisigh; is comhairle fhadcheannach a thugtar don ábhar údair scríobh fán tsaol ar a bhfuil cur amach aige. Ach, ainneoin cumas struchtúir na scéalta, misneach an chur síos ar leithéid an ghinmhille, cruinnas na tuairisceoireachta agus an Ghaeilge mar uirlis atá go neamhghnách umhal do thoil an scríbhneora, braithimid go bhfuil rud éigin in easnamh. Blianta, b'fhéidir?

Trom agus Éadrom

DEUS meus adiuvá me teideal agus chéad líne iomáinn mhóir a chantar go forleathan go fóill. Naoi gcéad bliain ó shin, in 1086, a fuair fear a chumtha bás. Comórtar Maol Íosa Ó Brolcháin go cuí sa leabhar bheag faoin ainm sin a scríobh Muireann Ní Bhrolcháin agus a d'fhoilsigh An Sagart ar £2.00 bog, £4.00 cruu.

Bhailigh an Dr Ní Bhrolcháin, atá ina léachtóir i Má Nuat, cuid dánta Mhaol Íosa



le chéile. Chuir sí cagar ceart scolártha orthu, agus don phobal mhór sin nach bhfuil léamh Ghaeilge na tréimhse sin acu, sholáthraigh sí leaganacha nua Ghaeilge de gach dán.

Cuireann sí síos ar staid na hEaglaise aimsir Mhaol Íosa, ar a pháirt sin san Eaglais, agus ar an ghaol dhlúth a bhí idir sin agus scríobh agus ábhar a chuid dánta. Sampla maith de pietas oibiachtúil scolártha agus de mhórtas cine.

Táthar cinnte gurbh é an file féin a scríobh ocht gcinn de na dánta, a bhfuil os cionn 260 líne sa dán is faide díobh, "Ocht bhFíoch na nDuáileí". Dearcadh peannaideach go leor a bhí ag an fhile, cé nár bhain sé leis na Céili Dé, ná níl cuid ar bith dá ngrá siúd ar an dúlra ag lasadh a chuid saothair. Is leor de lasadh an grá bladhmannach ar Dhia, a spreagann an dearcadh sin.

Is éadroime cuid den ceithre dhán atá anseo, a leagtar ar Mhaol Íosa ag scoláirí áirithe, ach a bhfuil an Dr Ní Bhrolcháin in amhras faoin bhreith sin. Tagaimid léi. Ní amháin nach mbaineann Maol Íosa féin an éadroime sin amach, ach ní bhíonn sé sa tóir ar an fhineáilteacht friotail atá le feiceáil ar chuid acu ach oiread. Mar sin féin, ar mhaithe le hiomláine — agus éadroime! — is maith anseo iad.

Eagarthóir: Deaglán de Bréadún

Today
14th January 1987

TODAY, WEDNESDAY, JANUARY 14, 1987

Stay pure to avoid Aids, say bishops

USING condoms to avoid the risk of Aids is wrong, Ireland's Roman Catholic bishops declared yesterday.

They said that the only reliable safeguards were to be faithful to a marriage partner or to practise "self-denial and self-restraint outside marriage."

The bishops warned of the "grave danger" that encouraging the use of condoms would lead to more permissiveness and a further spread of the disease.

But they accepted in their first statement on Aids that Ireland could be facing an epidemic and said it was imperative to stop it.

Moral

The bishops declared: "It can scarcely be denied that its alarming worldwide spread is to a large extent a consequence of actions and behaviour which have their roots in moral disorder."

- An Aids bus with experts to advise those who fear they could be at risk will tour Cheltenham, Gloucestershire.

- The Samaritans in Bristol are to be taught how to counsel callers worried about Aids.

- A survey in America showed a rise in murders and other attacks on homosexuals following the Aids crisis. The National Gay and Lesbian Task Force, a civil rights group, is investigating the increase.

SL

INFORMATION ON AIDS

THE DEATH at the end of last year of a prisoner in Mountjoy Jail from AIDS has shown the totally inadequate response of the Dublin government and its various agencies both to that disease and to the drugs epidemic.

Several years ago, when the heroin epidemic was beginning to claim young lives in Dublin, action to rid communities of the drugs menace was left to local people. The victims of drugs — the addicts, their families and neighbours — were left with little help

from the state agencies charged with guarding public health (although the Concerned Parents Against Drugs movement, even with its limited resources, tried to provide back-up services wherever possible). The reason for official inaction was that successive governments had denied the seriousness of the problem until it was almost out of control. The response to AIDS has been similar.

The Mountjoy prisoner died because he used a dirty needle to inject himself with drugs. At a press conference in Dublin last month it was pointed out that the

first that many drug-users knew of dirty needles carrying the risk of AIDS infection was when they received test results showing that they had the disease.

Gay Health Action held the press conference to launch an information pack and booklet on AIDS. For the past two years the group has been providing essential information on the disease without any help from the Dublin government which has only in the past few weeks finally decided to take some action.

REPORTING

As well as medical facts and health advice the pack contains the National Union of Journalists' guidelines on the reporting of AIDS — guidelines that have been breached by the sensational reporting of the disease. In the case of the Mountjoy prisoner, his name and family background were publicised without any regard for his relatives.

The *AIDS Information Booklet* is available in bookshops (price £1.50) and the information pack is available from: Gay Health Action, PO Box 1890, Dublin 1.

INFORMATION AIDS BOOKLET

The Cork Examiner

THURSDAY, JANUARY 15, 1987

The nation (i)

AIDS and the bishops

A NUMBER of debates on major issues during recent years have taught us, or should have taught us, that the Churches have both the right and the responsibility to inform their adherents on the morality of these issues, such as contraception, divorce and abortion. That right is inalienable and though it has come under fire from some elements who oppose Church teaching, it cannot be either diminished or removed.

This is just as true of the present debate on the AIDS question as it has been of any of the others.

Indeed, one of the things which the AIDS scare has brought very forcefully into the forefront is the moral basis on which the position of the Catholic Church is founded: that the terrible disease results, in part at least, from "actions and behaviour which have their roots in moral disorder".

The hierarchy is correct in stating that one of the surest methods of prevention of the spread of the disease is "self denial and self restraint outside of marriage". The problem, with respect to the bishops, is that this remedy does not address itself to all of the conditions in which AIDS can and does flourish.

For instance, how does one preach self restraint to a confirmed drug addict? And how does one deal with those people who are not of the Catholic faith, or even those who are, but who are lapsed and who do not, therefore, believe that the Church's message is for them?

The creation of a new morality tends to assume an ideal society in which everybody will conform to what is sensible, practical and moral. The problem is that this is not an ideal society and human nature being what it is, there will always be those who, for one reason or another, will lay themselves open to contracting this dreadful killer disease.

This, of course, is not the fault of the hierarchy, nor is it their fault that their teaching, which may be acceptable to the majority of Catholics, cuts no ice at all with the few who will leave themselves open to risk. We agree with the bishops that it would be a pity if the debate on this very serious issue were to be reduced to a row about availability of condoms and needles.

Having said this, it must be remembered that we are dealing with a highly virulent killer disease and even accepting the bishops' call for higher moral standards, which would be the ultimate preventative, how does the nation cope with those who, for one reason or another, will refuse to respond to this call?

Are they to be advised to adopt some other remedy in order to save their own lives, or are they to be refused what some would see as this very necessary advice and allowed to contribute to their own doom? It is a bleak choice indeed.

Finally, while we wholeheartedly agree with the bishops that AIDS victims must be treated with every compassion, the problem is that of prevention rather than response to affliction. This is what the debate is all about. Potentially it is far more serious than any of the other moral issues which have been raised in recent times.

SW

Evening Press
15th January 1987

Call for AIDS test before marriage

A top Anglican churchman has urged all brides and grooms to undergo an AIDS test before they marry.

The Ven. Basil March, Archdeacon of Northampton, said there should be no hidden secrets between two people who want to marry: "Marriage is all about love, and love is about being open with each other. So why not have the tests?" he added.

Meanwhile an Anglican rector has scrapped holy communion at his church because of the AIDS scare.

Canon James Ayre said: "Some people were nervous of taking communion wine from the same cup."

The 400-year-old St. Mary's Church in Cheadle, Greater Manchester, is believed to be the first in the country to stop communion because of the fear of infection.

But a spokesman for the newly formed AIDS health line said: "Fears about the disease are getting out of proportion.

"It can't be caught from a drinking glass, a toilet seat or by holding hands."

The Irish Press, Thursday, January 15, 1987

Barry backs Church on Aids

THE Minister for Foreign Affairs, Mr. Peter Barry, has supported the Catholic church in its promotion of monogamy and fidelity as the solution to the killer disease Aids. But he also admitted that he supported the use of condoms as a way of combating the disease.

In an interview with "Hot Press" magazine today, he said that the disease was so appalling that "all the stops will have to be pulled out to bring the message home to people." Referring to the controversy on the use of condoms as a means of stopping the spread of Aids, he said: "I would have no problem about that. But that is at the end of it. I think the solution is fidelity."

He also saw scope for the abolition of

celibacy in the Church, and predicted that "sometime in the future" there would be married priests. He also saw nothing wrong with having women priests.

Admitting that the highlight of his political career was the moment he stepped off the helicopter in Stormont to become the first Irish Minister to take part in the Anglo-Irish Conference, Mr. Barry said that he believed that under the surface, a lot of moderate Unionists were looking at the Agreement quite seriously.

The main achievement had been the resolve of the British Government to maintain the Agreement in the face of Unionist opposition. Up to that, many Unionists had accepted that it was part of their culture to complain loudly to the

British Government if they didn't like something, and the Unionists were in backed off, because the Unionists were in the dominant position in the North.

The onus was now back on the Nationalists to talk to the Unionists and persuade them that there was an "unthreatened future" for them on this island. He added that while the original "code of conduct" proposed for the RUC had not yet materialised, he felt it would come about "very soon."

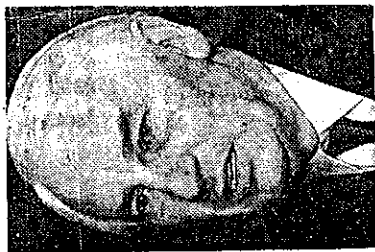
He still maintained that Nationalists could join the RUC and still be Nationalists, but what would stop them would be "Provo intimidation."

Turning to international affairs, he referred to a meeting with the Foreign

Minister of Nicaragua, Mr. Miguel d'Escoto recently, and said he did not approve of any interference by an outside power, whether it was American or Russian, anywhere, not just Nicaragua.

He also revealed that he had invited the Soviet Foreign Minister to visit Ireland.

On other politicians, he saw Ian Paisley as a "gifted man" with great presence, and charisma and a "marvellous orator." He also felt he could relate to both Garret Fitzgerald and Charlie Haughey, that even if Fine Gael lost the next election that Dr. Fitzgerald would remain as leader. But Mr. Barry did not rule out the possibility of his ever taking up the party leadership, and said as an aspiration, it was by no means dead.



Mr. Barry... Fidelity the solution.

Irish Times
15th January 1987

THE IRISH TIMES

3 D'OLIER STREET, DUBLIN 2
THURSDAY, JANUARY 15, 1987

AIDS

Sir, — There have been a number of criticisms, recently, by Catholic spokesmen, of the proposed health programme to combat the spread of AIDS. Most of these criticisms have centered on the advice that condoms be used as a safeguard against contacting AIDS. The Catholic position appears to be that such use of condoms is morally wrong.

During the "pro-life" amendment debate we were led through that tortuous maze of Catholic ethical theory known as the doctrine of double-effect. This held that, for example, the direct killing of the foetus was immoral but that the indirect killing was not so. In certain operations the death of the foetus was foreseen as a consequence of the operation but was not directly intended and consequently no moral blame attached.

If this doctrine of "double-effect" is applied in the AIDS debate it would seem to follow that the use of condoms with the intent of avoiding AIDS (the "direct intent") whilst recognising that a pregnancy would be avoided (the "indirect intent") would not be morally wrong.

Remembering, however, the debates on abortion, divorce and nullity it is surely futile to expect some intellectual honesty or compassion and least of all consistency from Catholic spokesmen in the forthcoming debate on AIDS. Indeed, having been involved in these earlier debates I now believe that, to the Catholic Hierarchy, questions of truth, honesty or morality itself are entirely subservient to their sole aim which is the furtherance of Church power.

On a wider note, I wish to suggest that using the concept of power as a tool for an analysis of the attitudes of the Catholic Hierarchy is far more revealing than attempting such an analysis using concepts of morality or social progress. For example, it has often been wondered at as to why, of the myriad categories of sin in the Catholic catechism, sexual sin has such a pre-eminent position. The clergy are celibate (and thus perceived as non-sexual) whereas the laity, as a rule, are not. Thus increasing the emphasis on sexual sin has the simultaneous effect of raising the status of the clergy (perceived, as they are, as beyond sexuality and thus beyond sexual sin) and lowering the status of the laity. Moreover, sexual sin is the only category of sin that has this effect, as is evident if one imagines the effects of the clergy defining, for example, drunkenness or greed as the pre-eminent sins — they would soon find themselves subject to a rather uncomfortable scrutiny from the laity which would lead to a diminution of their power and status.

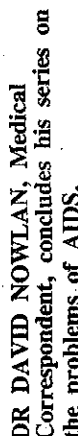
In summary, I am suggesting that the underlying aim of the Catholic Hierarchy is to increase the power of the institutional Church rather than the usually stated aims of creating a more moral and just society, and that such an analysis explains, for example, the emphasis the clergy place on sexual sin. — Yours, etc.,

GERRY ROCHE,

The Grange Cottage,
Mulhuddart,
Co Dublin.

TODAY

£500,000 that could be very well spent



The most efficient means of transmitting the virus from one person to another appears to be by way of blood-to-blood contact. Thus, case after case of AIDS have been reported as a result of transfusions where the blood donor was infected (and undetected as such), and as a result of the administration of blood products, such as those used to treat haemophilia, prepared from large pools of donated blood plasma where usually one or two donors to the pool need to be carrying HIV in order to contaminate the whole pool.

Another very efficient means of transmitting blood-to-blood transmission of the virus is at what happens between a pregnant woman and the fetus in her womb. This means of transmission leads to infected babies being born to infected mothers, and these infected babies have a greater chance than most other individuals of becoming full-blown AIDS as they develop.


The next most efficient means of transmitting the virus appears to be by way of a heterosexual, where

Other means of transmission seem to be very inefficient indeed. Despite HIV having been found in human saliva, no case of transmission by this means has yet been proven, although most preventive educational programmes will warn that "deep kissing" may carry some risk (where lip kissing does not) and that toothbrushes should not be shared, because they might abrade the gums and transmit the virus in this way. Similarly, those with sores on lips or gums may be more liable either to give or to receive the infection.


Your very FIRST CHOICE should be to GET OFF DRUGS.

1. BOIL the Works


(the best method)




✓ Boil the water in the bubbling



✓ Separate the sugar and wax from the needle from the string using



✓ Drop all the parts into the water



✓ Boil for 15 minutes

BOILING WATER

will kill the AIDS virus

[illegible]

A leaflet aimed at preventing the spread of AIDS among drug-users, published in California.

of people developing in those already carrying HIV, there is need for counselling on the healthier lifestyles. There is some evidence to suggest that if stress can be avoided, and if the virus carrier avoids smoking and excess alcohol, the rate of progression of the disease can be delayed.

It has been estimated that the cost of a reasonable preventive programme in this country would be about £500,000. This is a small amount if, indeed, it prevents further spread of AIDS, and the cost of treating each case of AIDS is about £20,000, and we know that more than 500 people already carry the virus.

Without the most vigorous preventive campaign, aimed at every nook and cranny of society, it is probable that the disease and its means of transmission (and, hence, its avoidance), there is no

Carole's address is: PO Box 11884, Sheriff Street, Dublin 1. All contacts are completely confidential. Contact may also be made with Carole via Gay Health Action at the numbers above (again, confidentiality assured). For more information, see the list of Refect in available in the AIDS Helpline.

Reason why the virus should not continue to spread here as it has in Africa. Although work to prepare a vaccine is moving apace, and although several individual and group trials of experimental drugs are under clinical trial already in the hope of curing, or at least halting infection, no effective medicinal means of combating AIDS will be generally available for several years.

Already up to a quarter of the population of both sexes in some central African cities is already

Getting the information

public information on AIDS is available in the Republic only through the voluntary Gay-Health Action groups. In Dublin the telephone number (omitted from 11.00 a.m. to 4.00 p.m. on weekdays) is 01-7170895. In Cork information is available at 021-9670226 between 2.00 p.m. and 5.00 p.m. on Mondays and Fridays. In Belfast the AIDS Helpline number is 226517, manned on Fridays between 7.00 p.m. and 10.00 p.m.

People affected by the Human Immunodeficiency Virus — whatever the source of infection — may seek counselling from Cairde (another voluntary group). Cairde's address is PO Box 1384, Sheriff Street, Dublin 1. All contacts are completely confidential. Contact may also be made with Cairde via Gay Health Action at the numbers above, (again, confidentiality assured), and counselling services in Belfast are available via AIDS Helpline.

we also respond.

carrying HIV; come what may, that terrifying figure is bound to increase. If we do nothing here, a similar situation will develop here. We must therefore take urgent and dramatic steps to alter behaviour that might increase the spread of the virus in Ireland. The first step towards changing people's behaviour is to provide them with information, and that is what this series has set out to do. But it is only a very small fraction. There are many more to be taken. There are many more to diminish.

Aids blood advice warning

By Jill Sherman

Aids specialists have given a warning that some telephone help lines are advising people not to have blood tests if they suspect they have the virus.

Dr Charles Farthing, an Aids registrar at St Stephen's Hospital, Fulham, south-west London, said that although doctors were concerned about the quality of advice given on some Aids help lines, most people dedicated enough to talk for hours on the phone would be sensible enough to give the right advice.

"We are more concerned about some Gay activist help lines which advise callers not to have a blood test. People suspecting they have the virus can get very confused and concerned."

The Terrence Higgins Trust has a policy of pointing out

both the advantages and disadvantages of having a test, and letting the caller make the decision. But Dr Farthing said that some of the trust's operators advise against.

The Department of Health handled more than 450 calls on its Aids Advice Line on Monday, the first day of the leaflet distribution to households throughout the country.

The DHSS is operating a three-tier system so that most callers are directed initially to its 24-hour, free, special Aids line on 0800 555777, the number printed on each envelope containing the Aids leaflet "Don't die of ignorance".

A taped message says that most of the information the caller needs will be contained in the leaflet but it also gives

another number which operates 24 hours a day.

These calls are taken by Telecom staff.

If the caller obviously needs counselling, he or she is given a third number, manned by 50 part-time volunteer advisers, who have been recruited from the National Health Service, social services and voluntary organizations.

● Two businessmen are setting up their own private blood bank in the wake of the Aids scare. Mr Peter Arthur and Mr Jonathan Lister, former London property developers, intend to charge a one-off fee of £440 plus annual payments of £160 to enable those who fear they will contract Aids through blood transfusions to have their blood frozen until it is needed.

London Times
15th January 1987

Extra money goes to fight Aids and cut waiting lists

By Jill Sherman

HEALTH SERVICE

Spending on hospital and community health services will increase by over £1.5 billion in the next three years. Allocations to these services will rise by £626 million in 1987-88 and by another £938 million to nearly £12 billion by the year 1989-90, according to the White Paper.

The figures confirm those announced by Mr Norman Fowler, Secretary of State for Social Services, in the autumn statement last year and show that although health authorities will get a 2.2 per cent increase over inflation next financial year, bringing hospital spending up to £10.972 billion, this will drop to an estimated 1 per cent increase in the succeeding two years.

Spending on family practitioner services, which are not cash limited, will increase by over £300 million next year and by a further £450 million in the next two years, bringing total NHS expenditure up to £16.76 billion by 1989.

Capital spending on hospital developments will increase from £762 million to £786 million next year, £811 million in 1988-89 and £842 million in 1989-90.

The Government is also

expecting sales of National Health Service land to reach over £130 million from 1986-87 and to increase substantially over future years, enabling health authorities to improve existing investment plans which include the building of 100 hospital developments in the next three years.

The White Paper reiterates the Government's priorities for the health service which include reducing waiting lists, combating the spread of Aids, tackling drug misuse and increasing the number of operations in key areas. Mr Fowler set targets for new growth following the autumn statement.

By 1990, the number of coronary artery by-pass grafts would be increased by 6,000 to 17,000, the number of hip operations by 10,000 to nearly 50,000, the number of cataract operations by 15,000 to over 70,000 and the number of bone marrow transplants by 200 to 550.

Total spending on the personal social services will increase from £2.6 billion this year to £2.8 billion in 1987-88 and to £3 billion in 1989-90.

SW