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4th to 10th June 1987

**WORLD WIDE ... how nations are tackling the killer virus**

# Waging war against the menace of AIDS

NATIONS worldwide are clamping down on border security in a bid to keep out the killer AIDS virus.

With an estimated ten million people now infected across the world, suspected carriers are being barred from entering many countries.

## Frontiers

Prejudice as well as science plays a part. In Japan and China suspicions are rife that it is a disease of the decadent white man of the West.

African nations have protested to European nations about the blocking of admis-

## Mail Foreign Service

sions without health tests to hundreds of their students.

Civil liberty groups and many United Nations delegates have argued against the closing of frontiers, warning that it raises international tension.

And scientists argue that border screening cannot check what they fear is the inevitable global spread of the epidemic.

Some countries are still prepared to allow visitors entry without screening.

Switzerland has no intention of screening said a government spokesman.

The Swiss view is that someone suffering from AIDS is no different to someone with cancer. 'It's a question of democratic and humanitarian law,' said the spokesman.

## Volunteers

And France does not envisage any special AIDS tests on foreigners. Officials believe there must be no action which could be interpreted as discriminating against visitors.

But as Britain prepares to test an AIDS vaccine on volunteers for the first time, much of the world is already closing its doors to sufferers.

## The testing time ahead for vaccine scientists

By JOHN ILLMAN

Medical Correspondent

AN AIDS vaccine could be tested on human volunteers in Britain within a year, a researcher said yesterday.

Professor William Jarrett, who helped to develop the vaccine at Glasgow University, said he would be willing to test it on himself.

'If you are putting forward a vaccine you should also be ready to try it,' he said.

Professor Jarrett, whose 29-year-old daughter Ruth and brother Oswald are also part of the Glasgow research team, was speaking in Washington at the third International AIDS Conference.

The hope is that anti-bodies produced by the vaccine will provide protective immunity to people subsequently infected by the virus.

But many experts are worried that they will fail to do so — people infected by the virus naturally develop anti-bodies which offer little if any protection.

## Risk

What is desperately needed in the multi-billion quest for an AIDS vaccine is a kind of super-charged antibody, but scientists are still seeking this elusive 'magic bullet'.

Professor Jarrett knows he will not be exposed to any significant risk by testing a trial vaccine on himself.

The vaccine being developed by the Glasgow team is one of a dozen or so now under development around the world.

It will take at least five to ten years to test properly any products showing initial promise. Vaccine development requires exhaustive animal testing, followed by tests on small groups of healthy humans.

Only if these tests are successful can research proceed to tests on large 'high-risk' groups such as homosexuals or drug addicts.

## The countries which take a tough line against those who have the disease



**UNITED KINGDOM:** Immigration officers can refuse entry to people suspected of being a risk to public health. They act on the recommendation of port medical inspectors. One U.S. airline steward — known to have been infected has already been refused entry.



**UNITED STATES:** The Senate voted 98 to 0 this week to test all immigrants and exclude those who are positive. It is expected to become law. In effect it adds AIDS to a list of dangerous diseases that already apply to would-be immigrants.



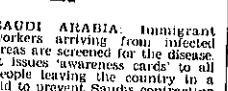
**BELGIUM:** With 230 cases of AIDS, 70 per cent of them foreigners, mainly Africans, it insists on AIDS test for foreign students applying for grants. Carriers are refused entry to the country.



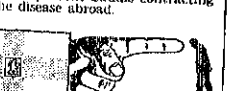
**WEST GERMANY:** Immigration officers are instructed to watch for foreigners who 'may be infected'. They turned back one prostitute from Africa who carried a medical report saying she was infected.



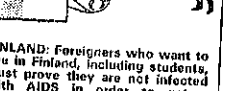
**QATAR:** The Gulf emirate bans AIDS sufferers from entering the country and recently refused to allow a six-year-old boy dying from the virus in London's Cromwell Hospital to return home.



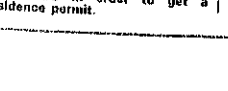
**INDONESIA:** It will not grant visas to AIDS victims. No one in the 168 million population has been diagnosed as a sufferer, though several have tested positively as carriers.



**INDIA:** Foreign students face mandatory testing for AIDS and any found to be carrying the virus are deported. Also in the pipeline are plans to test tourists who intend to stay for more than a month.



**JAPAN:** Parliament is debating a government proposal to bar any foreigner whom immigration authorities suspect may be carrying the AIDS virus.



**PHILIPPINES:** Foreigners applying for a permit to live in the country for more than one year have to prove to the authorities that they are not infected.

EVENING PRESS, THURSDAY, JUNE 4, 1987

## AIDS man accused of rape

A 27-year-old drifter suffering from AIDS was charged in Columbia yesterday with rape and assault and battery with intent to kill.

Terry Lee Phillips was not required to enter a plea in the municipal court regarding an incident on May 9 in which he allegedly raped a woman in a wooded area in Columbia.

"Our theory is that the AIDS virus was as much a deadly weapon as a gun or a knife," said prosecutor James Anders.

"There is no question in our minds that this person went out with the intention to give someone else this virus. His attack on the woman was an attempt to kill her by giving her this terrible disease," he said.

The prosecutor said he would bring murder charges and seek the death penalty if the woman was found to have AIDS and died.

If found guilty, Phillips currently faces a maximum of 30 years on the rape charge and lesser sentences from 20 years down on other charges including resisting arrest. Police said Phillips had spat at an officer.

Police said the victim had told them Phillips asked her for a knife to get some pus out of his finger, then threatened her with the blood before raping her.

**Evening Press**  
**4<sup>th</sup> June 1987**

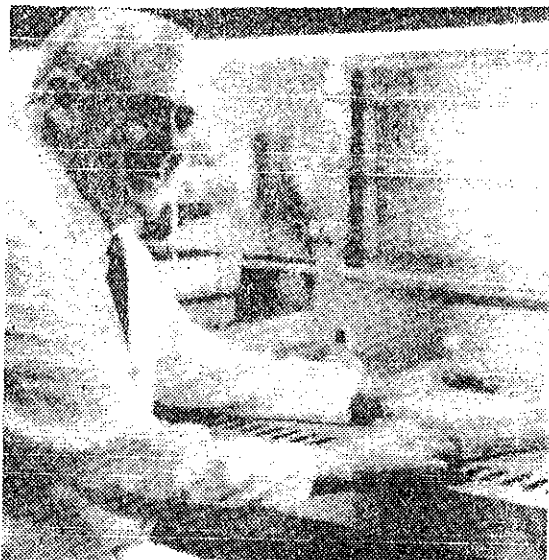
EVENING PRESS, THURSDAY, JUNE 4, 1987

## **AIDS drug to go on sale here**

The controversial AIDS drug, Retrovir, will be on sale here within months, according to the National Advisory Board.

Dr. Allene Scott, NDAB medical director, said the Board would grant approval for distribution of Retrovir before the end of June. Some queries concerning side-effects had been made to Wellcome, but 'we are quite satisfied, nonetheless, that the drug will become available under rigid control', she said.

Irish Independent  
4<sup>th</sup> June 1987



● Professor William Jarrett . . . AIDS vaccine hope.

## Vaccine for AIDS tests 'within year'

AN AIDS vaccine will hopefully be tested on human volunteers in Britain within a year, a leading researcher said yesterday.

Professor William Jarrett, of Glasgow University, who has developed the vaccine, said he would be willing to test it on himself as well.

He told the Third International AIDS Conference in Washington: "We are hopeful that within a year we will have a product that we might for suitable volunteers give to them to see if they respond well."

If that happened, and suitable safety tests were devised, a clinical trial could be mounted, he said later on a BBC radio programme.

Asked if he would be willing to put himself forward as a human volunteer for testing the vaccine, he replied: "Oh, absolutely. If you are putting forward a vaccine, you should be ready to take it yourself."

Prof. Jarrett made it clear that vaccines were almost always first tried by scientists themselves. If this proved successful, a small field trial could then be mounted involving people who were at high risk from AIDS.

The vaccine has already been tested on animals with encouraging results. Tests show that they develop antibodies to the virus after being injected.

● New York's mayor Ed Koch wants mandatory AIDS testing for all foreigners entering the U.S. . . . including tourists, visitors and business people. Already President Reagan has ordered that AIDS be added to the list of diseases which bars aliens from settling in the U.S.

THE IRISH TIMES, Thursday, June 4, 1987

# Koch now calls for AIDS tests on all visitors to US

From Sean Cronin,  
in Washington

MAYOR Ed Koch of New York, wants mandatory AIDS testing for all foreigners entering the United States, including tourists, visitors and business people. The call follows a 96-0 Senate vote requiring AIDS testing for immigrants. The amendment now goes to the House.

President Reagan has ordered AIDS added to the list of diseases such as tuberculosis, syphilis and leprosy which bar aliens from settling in the US. However, neither the Senate nor Mr Reagan mentioned testing of foreigners or illegal immigrants who apply for amnesty under last November's immigration law.

Previously, Mr Koch had denounced mandatory testing for US citizens as a violation of confidentiality. Asked why he has changed his attitude, Mr Koch replied: "Many of the

undocumented aliens in this country today are people who came here on tourist visas. That's how they got into the country. They didn't slip over the borders illegally."

Irish citizens who enter the US illegally usually come on tourist visas. Mexicans and other Central Americans usually cross overland into Texas and California. Haitians and some other Caribbean people come by sea.

Mr Koch has no authority to bar anyone from the country but 2.7 million people enter the US annually via New York. His opinion on the matter will carry weight. Presumably, if his advice is followed, visitors would have to produce medical documents proving that they had tested negatively for AIDS. The State Department, whose responsibility this is, had no comment on Mr Koch's remark.

Asked if he favours a test for a

short business visit, Mr Koch replied: "What difference does it make? Why not?" He thought there should be such a test for foreigners regardless of how many trips they make to the US. It's not for him to work out the details of how this would be done.

The Director of the World Health Organisation's AIDS Programme, Dr Jonathan Mann, warned an AIDS conference here of "a rising wave of stigmatisation against Westerners in Asia, against Africans in Europe, of homosexuals, of prostitutes, of haemophiliacs, of recipients of blood transfusions."

Dr Mann went on to explain that the spread of AIDS is "a direct threat to free travel between countries and, more generally, to open international exchange and communication."

See also page 6

Times  
4<sup>th</sup> June 1987

# I will test the Aids vaccine on myself, says research chief

By Thomson Prentice, Science Correspondent

4/6/87, p3

The prospect of a British vaccine for Aids being developed ahead of the rest of the world are increasingly bright, one of the leading researchers involved confirmed yesterday.

Professor William Jarrett, a veterinary researcher at Glasgow University, also told of his willingness to test the vaccine on himself.

The professor has emerged as an important figure in vaccine development at an international conference on the disease in Washington.

He confirmed that the vaccine he and colleagues in Glasgow are producing is likely to have its first human trials later this year or early next year.

He said that human testing is a tradition in medicine, and added: "Of course I will be prepared to do it."

"I believe in the vaccine and if I did not test it on myself it would be wrong to ask others to go through the same process."

"I don't think there is any real risk. I cannot say for certain what effect it might have on the immune system, but there is certainly no chance that I or any other volunteer would develop Aids as a result."

The work, which is being supported by the Medical Research Council, is largely based on Professor Jarrett's successful work on a vaccine for leukaemia in cats, a condition closely related to Aids in humans.

The first trials may involve volunteers drawn from drug addicts in Edinburgh, where levels of infection of the Aids virus are among the most serious in Britain, or from

homosexuals who are at risk from the disease in the South of England.

Professor Jarrett said that there were now solid grounds for optimism about the potential vaccine.

"A year ago there was considerable pessimism, but we have made very good progress since then and although it is still too early to be over-confident my belief is that this vaccine will eventually emerge", he said.

One of the main reasons for the progress has been the emergency funding for Aids vaccine research provided by the Government through the Medical Research Council. More than £14.5 million has been committed to a wide range of projects, including the Glasgow work.

In addition, Professor Jarrett said, the MRC had succeeded in minimising delays. "A lot of bureaucratic red tape is being cut and although we must still ensure that all the safety factors are respected this is allowing us to move much more quickly", he said.

He said that discussions on how to plan the first human trials of the vaccine are likely to be held in the next few months. If drug addicts in Edinburgh are among the groups chosen to take part in the studies, the only volunteers involved would be those who are not already infected with the Aids virus.

Professor Jarrett said: "There is also a willingness among the homosexual community to assist us in this work. Again we would only consider those who are not already infected as participants in our trials."

In addition to funding from

the MRC, the unit in Glasgow has benefited from private donations amounting to about £250,000. Professor Jarrett said.

He declined to disclose the names of the benefactors, but said their money was being used to help provide better equipment, and more modern laboratories. Some of the money has been used to help build a containment laboratory for the research.

Strict regulations at the laboratory eliminate the risk of the virus escaping and all small pieces of equipment which are used in the research can be destroyed after they have been used.

"What is really exciting about our work is that we know that we have produced a successful vaccine against a very similar disease in cats", he said.

"That is a big moral force and to achieve it in one species of animals strongly suggests that it will work in humans. But we can't prove that yet and the human trials are essential before we know that we are definitely on the right lines."

Professor Jarrett said he and his colleagues were now working seven days a week on the research.

Asked if his wife was concerned about his personal safety if he chose to test the vaccine on himself, he laughed and said: "She has never expressed concern but, naturally she is anxious that all the safeguards are observed."

"I think what she hopes for most is that I and other members of the family would stop talking about Aids all the time."

\* \* \*  
AIDS ORGANIZATIONS find some allies  
in the business community.

Traditionally conservative in their philanthropy, corporations "are still the most hesitant to give to this cause," says William Jones of the Gay Men's Health Crisis in New York. Most corporate support has come from insurance companies, says Craig Smith of the newsletter Corporate Philanthropy Report. But more companies are becoming involved. AIDS "is starting to hit bottom lines," says Stanley Karson of the insurance industry's Center for Corporate Public Involvement.

Formation of the National Leadership Coalition on AIDS, which includes several large companies and business groups, is expected to spur corporate involvement. Getting American Telephone & Telegraph to underwrite a \$40,000 newspaper ad for the Oct. 5 "Dancing for Life" AIDS benefit in New York was like "the Good Housekeeping seal of approval," says Robert Yesselman of the benefit's board.

*Support from the art and entertainment world keeps growing: Today 72 New York galleries open a monthlong benefit featuring 600 artists.*

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# Mandatory testing and the AIDS epidemic

By Saul Kanowitz

Alarming reports about the continued growth in the number of AIDS cases have spurred a debate in the Reagan administration over what to do to fight this epidemic that has already afflicted over 35,000 people in the U.S. and taken the lives of 20,000. The proposal for mandatory testing for marriage licenses, hospital entry, immigration and of prisoners is put forth as a viable solution to fight the disease. But is it?

Secretary of Education William J. Bennett is the proponent of mandatory testing and backs an educational campaign of sexual abstinence which tells people not to have sex until marriage. Even within the administration there are those who see Bennett's position as hurting efforts to stop the epidemic. Surgeon General C. Everett Koop, the highest ranking medical official in the country, opposes testing. Koop favors sex education starting at the grade school level and the distribution of condoms.

One thing must be made clear: there is no test for AIDS. The test only shows exposure to the virus. A positive result on the test means neither that you have AIDS nor that you will contract AIDS.

The medical and scientific communities as a whole are opposed to mandatory testing as a means of checking the spread of AIDS. This has been true for most of the life of the epidemic.

A few months back, the Centers for Disease Control (CDC), the federal agency responsible for tracking and controlling illness in this country, called a conference on the question of testing where several hundred epidemiologists, scientists and civil-rights supporters discussed what to do about testing. They concluded that mandatory testing was unworkable to institute, was an invasion of a

patient's privacy and wouldn't slow the epidemic.

Quoted in Newsweek magazine of May 5, 1987, Dr. Hunter Hansfield of the Seattle-King County Health Department said mandatory testing "would frighten those most needing counseling and voluntary testing from participating in disease control. . . . Therefore, irresponsible proposals like this work against the control of AIDS." [Emphasis added.] Dr. Stephen Joseph, NYC Health Commissioner said, "Frank and explicit education and protection offered by condom use for the sexual activity" is the best way to protect the uninfected.

The World Health Organization has stated that testing people who want to immigrate in an attempt to slow the disease once it appears in a country is likely to be unsuccessful and only diverts resources and attention away from dealing with the epidemic.

## Policing the bedrooms

Teaching abstinence as sex education clashes with the reality of social relations. Trying to put everyone back in the closet sexually by policing the bedrooms won't work and will only leave the youth at the mercy of the disease. Historically, during times of sexual repression, as in Victorian England, ignorance about sexual

hygiene led to venereal disease in epidemic proportions. The evidence shows that people get sexually transmitted diseases such as syphilis, gonorrhea or AIDS through unsafe sex because of that ignorance.

Why is there a debate taking place now? For so long the ruling class was content to do little, if anything at all, in response to an epidemic that first primarily attacked gay men and IV drug users. The Reagan administration's political cheerleaders of the religious right were happy to use the misery this disease brought to the oppressed and disfranchised to whip up anti-gay bigotry, racism, chauvinism and violence.

But now predictions that the disease could reach proportions never before imagined demand action to meet what is and has been a national emergency. The federal Office of Technology Assessment forecasts that by 1991 there will be 324,000 diagnosed cases, the medical cost alone will increase 800% to \$8.5 billion, and monies spent on research, education and blood-screening will quadruple to \$2.3 billion.

## Exposes Reagan's reactionary agenda

The problem for the Reagan administration is that to do what is needed to combat the epidemic will contradict and expose their social agenda of racist attacks, sexual repression and chauvinist jingoism. The ultra-right in the administration can only offer more repression and attacks on civil liberties.

On the other hand, a working-class approach to combatting the epidemic would not only counter this reactionary Reaganite ideology, it would set completely different priorities for the government. To this end the following suggestions are made.

What needs to be done is to make available the funds for a war on AIDS

on a scale that the Pentagon gets for its wars of aggression. These funds would be used to educate for prevention, treatment and search thoroughly for a cure. They would provide the social services for those who are ill, begin a nationwide campaign that explains what AIDS is, how one contracts it, how to help those with AIDS and what one can do to have safe sex. They can immediately distribute condoms. Clean needles can be made available to all IV drug users without repression.

The right to voluntary, individual, anonymous testing must be guaranteed in an atmosphere free of witch-hunting. The testing must be in the hands of responsible scientists sanctioned by the communities affected.

All this implies a vigorous fight to remove the stigma associated with the disease. It will take fighting the anti-gay bigotry, racism, chauvinism and violence that the ruling class has fostered through ignorance and fear.

For the past seven years, this type of education and care has been provided by the lesbian and gay community, caring and progressive people through grassroots movements that have improved the quality of life for people with AIDS and have fought reaction. Victories have been won in the workplace and by the trade unions to protect the right to work of people with AIDS, although more needs to be done.

The battle to end AIDS is a battle against oppression. Eliminating discrimination against people with AIDS and against people of high-risk groups lays the basis for a scientific resolution of the epidemic. The fight to end AIDS is a part of the struggle to end all oppression. The courage of people with AIDS and the conviction of those fighting this crisis provides the basis for a broad-based campaign at all levels of society to overcome AIDS.

## March on Washington Oct. 11 for lesbian and gay rights!

Join in mobilizing for this historic demonstration which demands an end to the AIDS crisis. We need money for AIDS education, research and care, not for Pentagon wars! Call the national march office at (202) 783-1828 for more information.

## New AIDS drug and a new virus

BRITISH scientists announced the discovery of a drug they claim could have significant potential for the treatment of AIDS and cancer.

They said they had given the drug to a small group of dying cancer patients and now planned further trials involving both cancer and AIDS sufferers.

Previous laboratory and animal studies showed the drug inhibited the spread of cancer and the progression of AIDS infection.

The scientists, from London's Royal Post-Graduate Medical School at Hammersmith Hospital and the Bristol Royal Infirmary, made the announcement at a press conference in London.

One of the four scientists, Mr. Christopher Wood, senior lecturer in surgery at Hammersmith Hospital, said the drug called Contracan, had been injected in 30 patients with various types of cancer.

"Most of them were within days or weeks of death but ten are alive

today eight months after starting therapy. The patients also had relief from their symptoms," he said.

An AIDS-like virus that can cause a virulent form of leukaemia has been detected for the first time in American drug addicts, and there are fears it will spread to the general population, scientists at a Washington conference said yesterday.

Previously, the virus was known to exist almost exclusively on parts of Japan and the Caribbean.

Infection from a newly discovered type of AIDS virus is spreading across Europe, has appeared in South America and may occur in the rest of the Americas, a top French AIDS researcher at the conference said.

The Swedish Parliament yesterday decided to shut down sauna clubs for homosexuals in a move to contain the spread of AIDS in Sweden.

EVENING PRESS, FRIDAY, JUNE 5, 1987

# AIDS PATIENT INFECTS DENTIST

A New York dentist was apparently infected with AIDS by a patient, but the risk of such transmission is low overall, a medical researcher told the Third International Conference on AIDS.

But Dr. Robert Klein told the Washington conference that dentists generally run a low risk of becoming infected with the virus that causes the deadly disease. It was also highly unlikely a patient could get AIDS from a dentist, he said.

"You have much more of a chance of being hit by a car on the way to a dentist's office than you do of getting AIDS from a dentist," he said.

Mr. Klein, an infectious disease specialist, said only one dentist out of more than 1,000 taking part in a study tested positive for the AIDS virus.

Researchers also told the conference that an AIDS-like virus that can cause a

virulent form of leukemia has been detected for the first time among drug addicts and may spread to the general population. While only a tiny percentage of those with the virus became ill, "we are certainly concerned about the further spread," National Cancer Institute researcher Dr. Stanley Weiss said.

Dr. Weiss said two strains of the virus, identified as HTLV-1 and HTLV-2, were found in over a third of the drug addicts studied in New Orleans, with blacks and Hispanics testing at much higher rates.

A similar study discovered 12 p.c. of addicts in six New Jersey cities were infected. Unlike the AIDS virus, which is thought to strike within five to ten years after infection, Dr. Weiss said researchers believe it may take decades for this virus to cause disease.

# Bible best way to beat Aids

THE best protection against the killer disease Aids is to live by the teachings of the Bible, according to the General Assembly.

The assembly yesterday passed a resolution which would allow the Church to distribute its Aids warning and advice leaflets into the homes of all its members.

The Presbyterian leaflet contains a three-point set of rules by which young people in Ulster could protect themselves against the disease.

- Live cleanly.
- Stay well away from drugs and wrong sexual activity.

- Find young people who share these views and accept this lifestyle, such as in the community's churches.

A Presbyterian report on the disease said that in spite of feelings that Aids is a plague sent from God, there must be "resources expended in the hope of finding a cure."

It warned the disease would tax society to the limits to cater for the sick and dying and that it was a disease which was worse than leprosy or the plague.

The Church report also said there may be no alternatives but to introduce 'isolation hospitals', screening of every person for

symptoms of the disease — beginning with pregnant mothers — and identification cards and other "strict requirements".

"The British Government-sponsored scheme of sending a leaflet on Aids into every home and taking advertising space on the media was motivated by a desire to control the rapid spread of the disease."

"It was based on the concept that sexual intercourse could be made safer for those who had regular intercourse with a number of partners — so the use of condoms was recommended."

The report said the Church recognised that innocent people would become

infected. It listed these as rape victims, wives of unfaithful husbands and vice versa, victims of vile attentions of adult paedophiles.

"There is no alternative for those who wish to make life safer and the intimate relationships of life safer, than to practise chastity outside of marriage and faithfulness within it."

Only chastity would stop Aids, said the Church. "When you sleep with someone you are sleeping with every one he or she has slept with over the past seven years," it said.

# New virus drug raises possibility of cure for Aids

A DRUG has been developed which brings real hope for Aids patients and promises to help treat other virus diseases and cancer.

Ampligen works on a new principle and is much more effective in treating Aids than drugs developed so far.

It seems to rid the body of the Aids virus and for the first time raises the possibility of a cure rather than just a treatment which ameliorates the disease process.

The drug looks like a virus and tricks the body into redoubling its efforts to get rid of invading organisms. It appears to be without the obvious side effects of existing Aids drugs.

Ampligen is made from RNA (ribonucleic acid) — similar to the RNA which is the hereditary material of many viruses including Aids. Virus RNA carries a genetic message telling cells to make more virus RNA. However, ampligen RNA carries what scientists call a nonsense message which is not reproduced by the cell.

Such nonsense RNA was used 10 years ago to treat cancer and was found to be effective but it had too many toxic side effects and was abandoned.

By Oliver Gillie  
Medical Editor

Now scientists have found a way to make a nonsense RNA which gets into the cell and stimulates natural defences but is then rapidly destroyed before it causes any major side effects.

Ampligen, like the common form of RNA, is built as a double strand. But ampligen has been deliberately constructed so that portions of the double strand are not properly matched and therefore are kinked.

These kinks make ampligen vulnerable to enzymes (catalysts) which break it up easily into pieces — but not before it has induced the cell to make interferon and a whole galaxy of other substances whose job it is to stimulate white blood cells and "natural killer cells" which then attack invading viruses.

Ampligen, technically described as poly(I):poly(CI2,U), has been tested on 10 patients who had either Aids or an early form of the disease called Aids related complex. After between 10 and 40 days of treatment the patients no longer had Aids virus detectable in their blood and felt

much better — their glands became less swollen and they were much less tired.

The work on ampligen, which is published in the current issue of *The Lancet* under the names of 22 scientists, is being co-ordinated by William C Carter of Hahnemann University in Philadelphia, Pennsylvania.

The scientists say that the advantage of ampligen is that it not only causes a direct attack on RNA viruses, it also stimulates the immune system. Other Aids drugs such as AZT have an adverse effect on the immune system.

The scientists say in *The Lancet*: "Our findings suggest that ampligen alone may provide effective treatment in the early stages of this disease [Aids] and perhaps may become the foundation for different types of combination regimens for advanced disease."

Ampligen can be combined with other Aids drugs such as AZT and expand their effect or enable them to be used with equal effect in smaller doses. It is also able to cross the blood-brain barrier and so attack the virus where up to now it has been difficult to get at.

# America in an unholy mess over AIDS

Evening Press  
6<sup>th</sup> June 1987

JEREMY CAMPBELL  
in WASHINGTON

IN THE middle of an interview on what the American Government is doing about AIDS, an official at the Department of Health suddenly started to lower his voice, mumble, put his hand over his mouth and look around as if checking for concealed listening devices.

"God, help us with the AIDS epidemic," he almost whispered, "because the U.S. Government won't, Washington is not interested in the disease".

Puzzled, the interviewer asked the official, "Why are you so nervous talking about AIDS?"

"Are you kidding?" the official replied. "If you don't say what they want you to say, you get reassigned to the Indian reservations".

Blurted confidences such as that suggest reasons why America is in such an unholy mess over AIDS.

Ronald Reagan, who leaves today for the Venice Economic Summit, wants to put AIDS high on the agenda, but he can hardly escape the rich paradox that America, which let AIDS run almost out of control for years, has the nerve to announce that no one whose test for the disease is positive will be allowed to live here.

Since 1980 when the disease was first noticed, the official U.S. fight against AIDS has been in the hands of mediocrities, inept experts, frightened bureaucrats and the easily intimidated.

"Never", said a congressional aide concerned with health issues, "has such a bunch of second-rate people been put in charge of such a first-rate problem."

The overlord of the various Government agencies that deal with AIDS is Dr. Otis Bowen, who talks to Mr. Reagan about the state of the country's health.

It is widely believed on Capitol Hill that Bowen's heart is not really in the AIDS struggle. His pet project is catastrophic health insurance for the aged 65 and older.

Bowen virtually handed over the hot potato of AIDS to Dr. Robert Windom, Assistant Secretary of Health.

A colleague described Windom as "a warm, affable, back-slapping fellow, but he's out of his league". A Capitol Hill expert said: "If his IQ were any lower, you'd have to water him".

Recently, and belatedly, things have improved a bit, though, as Elizabeth Taylor said, it will probably take the AIDS death of a famous heterosexual woman to mobilise the people and resources needed to conquer the scourge.

One potent force goading the government on is the fact that in only three years, America's health bill for AIDS will be 16 billion dollars a year.

Yet there is still no official central registry of AIDS in formation. A doctor in California recently lost a patient to Cytomegalovirus, a typical AIDS related infection.

He could have saved the man by telephoning for advice to a doctor in New York, but he had no means of knowing that.

It has become an embarrassment that so many AIDS breakthroughs have been made not in the U.S., but in Paris, London, Israel and Switzerland.

Americans look at the safe sex campaigns in Europe, especially the installation of condom machines in French universities, and wonder why U.S. efforts are so paltry by comparison.

The result of all this is the usual American response to crisis, inaction, followed by a lurching to extremes because by then it is too late for moderation.

Extremism may take the form of legislation. A bill in Congress would require all American citizens to be tested for AIDS.

Or extremism may take the form of rhetoric. Larry Kramer, author of a play about AIDS, *The Normal Heart*, said: "Whatever Ronald Reagan may say, no substantial battle for an AIDS cure will be mounted while he is in office."

"There is only one word to describe his monumental disdain for the dead and dying: genocide".

Irish Independent  
6<sup>th</sup> June 1987

Irish Independent, Saturday, June 6, 1987

## AIDS kits for export

By NOEL SMITH

EXPERTS producing medical diagnostic kits at a new £5 million Irish plant are moving into the intensive battle against AIDS.

With about a year, the high-tech industry, part of a German group of companies, expects to be able to export basic "first generation" kits, to markets such as Asia, which will show whether a person has AIDS antibodies or not.

At the official opening of the new Flemming BmbH 63,000 sq. ft. plant at O'Callaghans Mills, Co.

Clare, yesterday, founding directors Ludwig Fresenius and Wolfgang Flemming were praised by Minister for the Marine Brendan Daly and industry promoters for their "tremendous" track record and rapid growth.

Irish and international experts employed at the Clare firm — it began with an investment of £260,000 and six employees in 1982 and now has 100 — research, develop and produce top quality diagnostic tests, including pregnancy tests, ovulation tests and tests for syphilis and rheumatoid illnesses.

Mr. Flemming predicted it would be about four years before more advance "second generation" AIDS diagnostic kits could be produced. And it would be a minimum of five to seven years before a successful vaccine, if any was developed.

The plant, which produces many of its raw materials on its 290-acre Clare farm has a turnover of almost £6 million a year and hopes to increase employment to 160 over the next two years. Some 20 p.c. of its staff are involved in research and development.

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**Irish Independent**  
**6<sup>th</sup> June 1987**

## **A chestnut AIDS drug?**

A drug extracted from an Australian chestnut tree hampers the ability of the AIDS virus to infect and kill blood cells in a test tube, and it may represent a new class of possible AIDS drugs, Dutch scientists report.

Castanospermine apparently sabotages a key protein of the AIDS virus, reducing its ability to make infected cells kill others by fusing with them, researchers said.



## Aids boost from Eire

A treatment which is believed to be a major breakthrough in the fight against Aids is being tested by an Eire institute.

The substance is reported to have restored the health of patients suffering from the early stages of Aids.

After 18 weeks of treatment, seven people suffering from Aids Related Complex, the first step in

To Page 2

## Aids boost

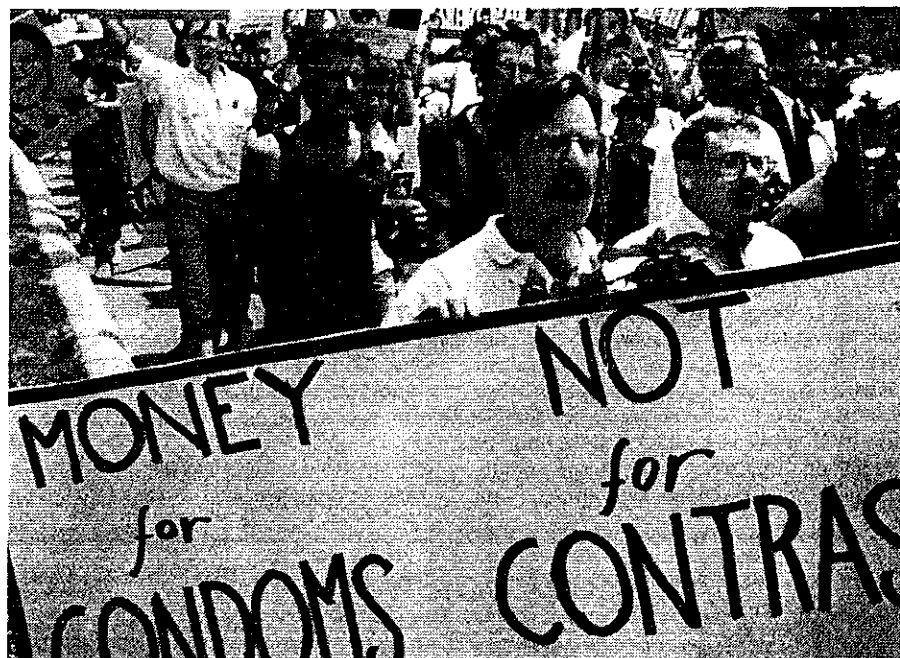
From Page One

the illness, had their immune systems restored.

Now the treatment, Ampligen, is to be given widespread tests in America by the Dublin-based Institute of Clinical Pharmacology.

A key figure in the institute is the former president of Queen's University Students' Union Dr Ian Brick.

# AMERICAN SURVEY



## No end to AIDS?

The protesters who chanted, strutted and squatted outside the White House this week were no more obstreperous than usual. But the policemen who arrested them wore special battle gear: yellow rubber gloves. Such is the impact of AIDS-related protest. Other opponents of the president's new AIDS-testing policy booed Mr Reagan from their \$250-a-plate tables at an AIDS fund-raising dinner on May 31st. A different group shouted down Mr George Bush at the third international AIDS conference the next morning. They got gentler handling. So, presumably, will Mr Reagan's six summit partners, who will try to agree upon a common view of AIDS in Venice next week.

Mr Reagan's first big speech on AIDS stopped short of endorsing the widespread mandatory testing that his conservative advisers and two Republican presidential hopefuls, Mr Bush and Mr Jack Kemp, have been demanding. He ordered compulsory testing only for prisoners in federal prisons and for would-be immigrants and permanent residents, who can be excluded from the country if they are infected.

(Military recruits and foreign-service officers are already subject to testing.) The president also called on states to do "routine" testing of their own prisoners, as well as of patients at sexual-disease and drug clinics and of couples applying for marriage licences. On June 2nd, the Senate unanimously approved compulsory testing for immigrants as well as for illegal aliens in search of amnesty. The mayor of New York would add all foreign visitors.

The tests are intended to provide a more accurate measure of the extent of the epidemic and to slow its spread. But evidence produced by experts at the conference in Washington suggested that compulsory testing may be ineffective for both purposes. Although AIDS tests are reliable for screening high-risk groups, with accuracy rates of 99%, they are much less reliable when applied to large, low-risk populations such as marrying couples: even double checks can produce false positives at a rate as high as 20%. (New tests, promising more accuracy and earlier detection, were reported to the meeting.) The other argument

against testing low-risk groups is the misuse of scarce resources: the initial test costs about \$5 but confirmatory tests cost around \$100. One estimate puts the price of discovering a single AIDS-carrier through mass screening at \$10,000. So far about a dozen states, including the biggest AIDS centre, New York, have rejected proposals for premarital testing.

The researchers at the Washington conference were virtually unanimous in supporting the widest possible voluntary testing of high-risk groups such as homosexuals and drug addicts. Yet their studies were inconclusive about the effects of testing on AIDS-transmitting behaviour. Surveys of homosexuals in Holland and Canada found that people who tested positive for the AIDS antibody were reducing the numbers of their sexual partners more radically than people who tested negative. Yet in France, Chicago and Baltimore, researchers found that changes in homosexual behaviour were unrelated to test diagnoses. They seemed to be correlated with more information about AIDS, with advice and with social class (71% of upper-middle-class French homosexuals were adopting safer sexual practices, compared with 30% of the less numerous working-class men).

Evidence of behaviour change is less clear among drug addicts, who constitute an increasing proportion of America's AIDS victims (now 17%) and the main entry point into the heterosexual community. But a San Francisco project found, contrary to the common wisdom, that this group is not wholly immune to persuasion. Over the past year, social workers persuaded two-thirds of a group of addicts to clean their disease-spreading needles with household bleach; many drug-takers also cut down needle-sharing. The project was less successful in inducing them to adopt safer sexual practices. Many researchers argue that using condoms and refraining from anal sex, which is usually the second stage of behaviour change, will have more effect in slowing the spread of AIDS than reducing the numbers of partners. An American study of 5,000 homosexual and bisexual men in four cities found 12% choosing celibacy and 28% monogamy but nearly half still engaging in high-risk sex.

Curiously, the biggest potential benefit of testing as a disease-deterrent was hardly mentioned at the Washington meeting and was raised as a moral, but not a legal, obligation by Mr Reagan. This is the trac-

WASHINGTON, DC

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## AMERICAN SURVEY

ing and informing of sexual contacts of AIDS carriers. Studies show that AIDS sufferers are often reluctant to inform their present and past partners of their exposure. Yet if officials take over this function, it can have drawbacks. Sweden, which requires the reporting of AIDS cases, also authorises the isolation of victims who wilfully spread the infection. It has recently registered a decline in numbers volunteering for tests. This is one reason why AIDS experts stress the need for confidentiality in testing. Mr Reagan skirted the issue. It will be brought before Congress in a bill jointly sponsored by Senator Edward Kennedy and Mr Henry Waxman, which also seeks to ban discrimination against AIDS victims.

This week the Senate approved an extra \$77m for AIDS education and drug subsidies, including \$20m to follow Britain's example in sending out a leaflet to every household. Britain's AIDS-information policy was widely praised at the conference. Yet British researchers pointed out that the \$33m advertising campaign, although it produced a 12-fold increase in demand for testing, mainly from low-risk heterosexuals, had little or no impact on sexual behaviour. They concluded that personal advice is far more effective than scare tactics.

Officially, nearly 36,000 people have AIDS in the United States. But the Centres for Disease Control noted this week that the American figure needs increasing by 10-20% to allow for under-reporting, another 10% for misdiagnoses and 15% for lags in reporting.

A recently broadened definition of AIDS will add another 20%, taking the American caseload alone well above the international total of 51,000 that is registered with the World Health Organisation. WHO acknowledges, however, that its world estimate should be at least twice as high. AIDS reporting is a delicate matter politically, especially in Africa, where some high-risk groups such as city prostitutes have infection rates as high as 85%. Africa has reported 4,500 cases, compared with 5,700 in Europe and only 150 in Asia.

Today's figures pale next to the projections for the future. Some 5m-10m people are now thought to be carrying the AIDS antibody, 1m-1.5m of them in the United States. Given the age and sex distribution, this works out at one man in 30 between the ages of 20 and 50, with blacks at three times as much risk as whites. On current reckoning, at least a third of current carriers will develop the disease within five years, though that proportion could eventually reach three-quarters or higher. By 1991, AIDS will cause more premature deaths in American men than any other disease.

Science offers promise, but not yet more than that, of a means of controlling AIDS. Potential vaccines are beginning to be test-

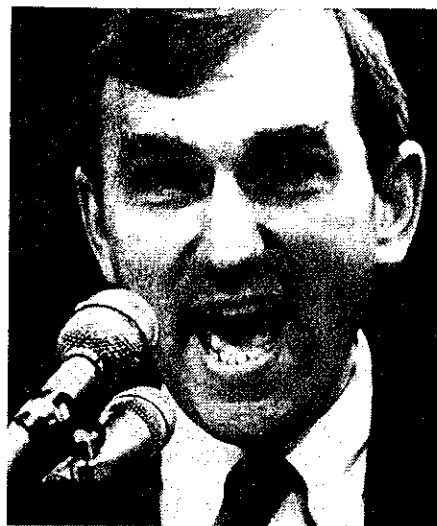
ed on humans. Other drugs besides AZT, the best known, are being released for experimental use. The doubling of the numbers at this week's AIDS meeting to nearly 6,000 suggests no shortage of medical talent on the job. Yet politicians have as big a role to play. The Venice summit and a world gathering of health ministers in Britain next January could bring more resources and more co-ordination into the battle.

## Iran-contra affair

### What never?

WASHINGTON, DC

The American Congress, which does not take kindly to being misled, is being asked to accept some surprising evidence from Mr Elliott Abrams, the assistant secretary for inter-American affairs. "That would be illegal," expostulates Mr Abrams, shocked at some suggestion of wrong-doing. He likes to portray himself at the Iran-contra hearings as incurious, complacent and remarkably foolish. Members of the joint



Outraged Abrams also outrages

committee, remembering the terminological inexactitudes he has offered their separate committees in the past, question whether, either way, he is fit for his job.

Mr Abrams testified on the heels of Mr

## The vagaries of Boland

Mr Richard Secord, the manager of the private airlift to supply the Nicaraguan rebels, said he had heard that the Boland amendment "is a piece of Swiss cheese; that Boland is an act which, if you had the IQ of a genius, you could not trace its meandering." But not all the witnesses have been so confused. Mr Robert McFarlane, the former national security adviser, said it was clear to him "that Mr Boland didn't want anybody in the US government assisting the contras."

Indeed he did not. But the Boland amendment, the brainchild of Mr Edward Boland, a Democrat from Massachusetts, had a troubled history. It was crystal-clear in its author's intent, as he has plaintively pointed out at the hearings, but frequently reworded, refined, undermined and misinterpreted. Although Mr Boland and his allies meant to stop in its tracks the administration's covert support for the contras, Congress as a whole was never so single-minded on any of the occasions when the amendment was debated.

Congress had no power to veto covert operations; it could, however, exert the power of the purse. This was the mechanism of the Boland amendment. Broadly speaking, between 1982 and 1986 the House of Representatives opposed the covert war and aid to the contras, while the Senate supported it. Horrible disclosures (the CIA-sponsored assassination manual, the mining of Nicaraguan harbours, reports of atrocities) kept opinion in continual ferment. In conference between the two chambers, compromises resulted that allowed some aid and imposed some re-

strictions. Mr Boland always thought he was sending the administration a clear message that support for the contras should stop. The administration chose to receive a message, generally, that the contras could always be supported somehow.

Against this background, Boland went through five versions, of which three were attached to various appropriations bills for three consecutive fiscal years.

● **Version one** (in force from December 21 1982 to December 8 1983) barred military aid to the contras by the Pentagon or the CIA for the purpose of overthrowing the Nicaraguan government. The administration actually endorsed this version. According to Mr McFarlane, it was presented by Congress, in a "surreal" way, as a favour to the president, allowing him plenty of room to support the contras. It allowed, in fact, the first major deception. The administration knew it could get its money as long as its purpose, according to Boland, was clean. It therefore argued that the contras were being supported merely to stop the flow of arms to guerrillas in El Salvador. The contra leaders, however, made no secret (except when lobbying Congress for money) of their intention to topple the government in Managua. As Mr McFarlane, in his tortured way, admitted, Boland "sowed the seeds, within the executive branch, of misleading, I believe, on our part." And how.

● **Version two** (in force from December 8 1983 to September 30 1984) set a cap of \$24m on military funds for the contras supplied by the Pentagon, the CIA or "any other agency or entity of the United States

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**Irish Press**  
**7<sup>th</sup> June 1987**

# **Diet key in Aids battle**

**By MARY JANE  
O'BRIEN**

PEOPLE with the Aids virus may be able to prevent it ever becoming active and developing into the fatal, full-blown disease if they change their diet and lifestyle, according to Mr. Rex Laselle, who will be speaking at a public meeting in Dublin tonight.

Mr. Laselle, a London-based osteopath and Shiatsu (acupressure therapy) teacher, claims that work carried out by the Boston Medical School shows that conventional medical treatment may not be of any more benefit in helping people survive than if they did without it.

According to Mr. Laselle, "since May 1984, the Boston School has been studying immune function in a group which includes ten men with full-blown Aids who have chosen not to enter conventional treatment. Eight are still alive after an average of 21.5 months after diagnosis.

"They have not been given medical treatment since, nor have they been in-patients since the diagnosis. Most are working. These men seem to be surviving at least as well as patients who have been treated. The average survival rate for men with Aids in New York is 29 months, he says, quoting documentation provided by the Boston School.

He says that the virus becomes active because the immune system has been lowered "out of dietary habits, out of attitudes to life, and out of psychological factors".

Mr. Laselle was invited to Dublin by the Irish Holistic Health Association. He has just spent the weekend teaching at a Shiatsu workshop in Navan.

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**Sunday Press**  
**7<sup>th</sup> June 1987**

## **IRISH FIRM TO MONITOR AIDS DRUG**

AN IRISH company is to supervise testing of a major new breakthrough for people suffering from the early stages of AIDS.

The Institute of Clinical Pharmacology at St. James Hospital in Dublin will supervise testing of the new drug Ampligen on 200 volunteer AIDS sufferers in the United States.

A spokesman for the Institute confirmed last night that they had been appointed to monitor the tests of Ampligen which a pilot study has shown to restore the health of people suffering from Aids Related Complex (ARC) — the initial stages of the killer disease.

The first phase of full clinical trials, which starts immediately in two US hospitals, will cost an estimated 10 million dollars.

Ampligen, which was discovered more than 10 years ago for possible cancer treatment, has no apparent side effects and has been found to halt the spread of AIDS in ARC patients and restore their immune systems within seven weeks.

## **THOUSANDS OF CONDOMS ARE STOLEN FROM IRISH FIRM**

**VERONICA O'Leary**  
has had her condoms  
stolen — all 4,320 of  
them!

She's the boss of  
Ireland's only condom  
company and this week she  
fell victim to a £4,000 theft.

For that's the value of the  
booty of R3 condoms  
swiped from her car at  
Howth, Dublin this week.

She told SUNDAY  
WORLD: "I'm very  
frightened about this —  
especially with the AIDS  
scare.

"If someone was to  
tamper with my merchan-  
dise and then sell them,  
God knows what would  
happen."

Mrs. O'Leary says she's  
anxious that some "sick-  
minded person" might  
somehow infect the con-  
doms or interfere with them  
before selling them off.

"That would have disas-  
trous consequences for the  
users and I'm afraid that I  
will not be able to stand  
over the effectiveness of the  
stolen condoms", she said.

A few weeks ago Ms.  
O'Leary hit the headlines  
when she slammed RTE's  
Today Tonight programme  
which featured rival Durex  
condoms during an AIDS  
special.

She said: "Our product is  
ever bit as good as Durex  
and we deserve recognition  
after all, we're providing  
jobs at home."

# AIDS delegates angry at Reagan remarks

Cork Examiner  
8<sup>th</sup> June 1987

**BY MARK HENNESSY**  
INTERNATIONAL delegates from last week's US conference on AIDS returned home in recent days dispirited by President Reagan's demand for mandatory testing of emigrants and prisoners.

However, they were left unaware of what could be the most important development so far in the battle to fight the fatal disease, a development involving the Irish Institute of Clinical Pharmacology.

The ICP, which is headed by Dr. Austin Darragh, has found that a new treatment, Ampligen, has improved the condition of patients suffering from AIDS Related Complex (ARC), by reducing the presence of the virus without dangerous side-effects.

Dr. Darragh's company will shortly supervise a \$10m study on 200 US AIDS sufferers and the drug could get the approval of the US Food and Drug Administration within a year.

Though the future for Ampligen could be bright, here in Ireland movement on the treatment may not be as rapid.

The Health Education Bureau information campaign on the disease

is now so low on funding that it cannot even attempt an examination of its actions so far.

Meanwhile, Gay Health Action, whose information booklets have been the bluntest, but probably the most successful, is threatened with closure from September for want of a miserly £40,000.

In Ireland, there are now at least 590 Irish people infected with the HIV virus, the first step for, maybe, half of them on the road to death by AIDS.

In all, there have been 19 cases of full-blown AIDS in this country, with a breakdown of the figures showing that three were intravenous drug users, nine were either homosexuals or bisexuals, five haemophiliacs and two were children infected by their mothers.

Of the 19, 11 have since died, including all the infected drug users, five of the homosexuals/bisexuals and three haemophiliac patients.

Closer to home, there are some 20 people from the Cork region known to have contracted the virus, with one of these now suffering from persistent generalised lymphadenopathy (PGL) — one of the two mid-way

stages to full-blown AIDS.

In the United Kingdom, the Department of Health and Social Security are reporting an alarming increase in the spread of AIDS among the heterosexual community — with 95 women infected through sexual intercourse.

Meanwhile, in the US the American Medical Association, warning of the dangers of contracting the virus through vaginal intercourse, has urged women to use condoms along with a spermicide.

The decision by President Reagan to add AIDS to the list of diseases such as tuberculosis, syphilis and leprosy which prevent people emigrating to the United States is for many the ultimate in irony.

In Dublin today, Gay Health Action intend to hold a protest outside the US Embassy at 12.30 pm to oppose Mr. Reagan's decision, which they described as 'backward and dangerous'.

"A nation which already has one in every 30 men between 20 and 50 infected by HIV+ and will rank AIDS as the cause of death second only to accidents by 1991 has hardly the right to

adopt such a holier-than-thou attitude," said one commentator.

However, the announcement by Mr. Reagan was welcomed in some quarters, especially by Dr. Austin Darragh: "Make no mistake, we are in a war situation and we must be prepared to suspend our civil liberties."

The reaction of the medical profession in the Netherlands to the disease came in for severe criticism from other EEC doctors, including Irish ones, at a recent meeting of the EEC Standing Committee of Doctors in West Germany.

The Dutch were accused, and they have failed to deny the charges, of practising euthanasia on 11 AIDS patients, and others, including the elderly.

One of their strongest critics at the meeting, Cork doctor Norman Murphy, said up to 1,800 people have died through euthanasia.

Normally the decision to opt for euthanasia is made by the patient, the doctor and the patient's family, said Dr. Murphy, who claimed the Dutch were privately willing to agree than euthanasia was carried out there.

"However, if the patient is incapable of making a decision it can be done without his permission if the patient's family and the doctor agree."

"That raises very serious questions. Killing people, in my view, is killing people — no matter how it is done," he said.

Back at home, the HEB AIDS television and newspaper advertisements continue to come in for attack from med-

ical, and other interested sources.

The head of the Sexually Transmitted Diseases Clinic in the Victoria Hospital in Cork, Dr. Jack Cantillon, criticised the failure to emphasise condoms sufficiently.

"I feel there is an urgent need for a very intensive educational campaign aimed at young people in schools, before they become sexually active," said Dr. Cantillon.

## Hoffmann-La Roche Wins U.S. Rights to an AIDS Treatment

WASHINGTON—The U.S. unit of F. Hoffmann-La Roche & Co., a Swiss chemical and pharmaceutical group, has received exclusive rights to develop a new medication intended to treat acquired immune deficiency syndrome, the U.S. Department of Health and Human Services said.

Hoffmann-La Roche Inc. will be allowed to take over further research on the drug dideoxycytidine, which the National Cancer Institute has been studying, the health department added.

Dideoxycytidine is a variation of a component of deoxyribonucleic acid, which carries hereditary information within living cells. According to preliminary research, dideoxycytidine can block the normal function of an enzyme necessary for the spread of AIDS from one cell to another.

Researchers noted, however, that the study of dideoxycytidine is in preliminary stages, adding that it is impossible to state with any assurance how well the substance will combat AIDS. (AP-DJ)



**The Times**  
**9<sup>th</sup> June 1987**

## **Ruling on Aids**

Doctors must not discuss the cases of patients found to be at risk of Aids infection without their consent, members of the British Medical Association decided yesterday.

A conference of medical academics decided that where tests showed a patient to be at risk, their GP and other practitioners providing clinical care should be informed, but only if the patient agreed.

The decision will become BMA policy if agreed at the annual representatives' meeting later this month.

## **Wait and see attitude to free drug needles**

IT WOULD be better to await the results of experimental programmes in other countries, including Britain, before making a decision on whether to give free needles to intravenous drug abusers, the Minister for Health, Dr. Rory O'Hanlon told the Dail.

He was replying to a question from Mr. T. Gregory (Ind), who claimed that a virtual AIDS epidemic faced intravenous drug abusers here.

Dr. O'Hanlon said that countries had diametrically opposed views on the value and, indeed, the ethics of methadone maintenance programmes. Many people regarded such maintenance as a form of social management rather than medical treatment and found it very objectionable on that basis.

Mr. Gregory asked if the Minister did not agree that the use of infected needles had for some time been the most common means of transmis-

sion of the virus among drug abusers and this had reached dangerous proportions. The Minister had recently stated that there were at least 3,000 drug users in Dublin. Would he not agree, therefore, that there was an urgent need for a free-needle scheme.

The Minister said the Department's HIV testing programmes showed that just under 20% of abusers tested were affected by the virus.

Mr. Emmet Stagg (Lab) said that the official booklet and advertising campaign on AIDS was simplistic, moralising and ineffective, and had been criticised by those directly involved with AIDS sufferers and people at risk. The lack of emphasis on the use of condoms and provision of free needles were serious omissions.

Dr. O'Hanlon said he did not accept that the campaign was limited. It was directed at the whole

**Daily Mail**  
**10<sup>th</sup> June 1987**

**Daily Mail, Wednesday, June 10, 1987**

**By JOHN ILLMAN,**  
**Medical Correspondent**

**DOCTORS** have been alerted about a new AIDS threat.

A confidential government report reveals the first cases in the world of health care workers believed to have become infected by the virus after being splashed by contaminated blood.

The warning, in a report from the Communicable Disease Surveillance Centre, in Colindale, North London says all the cases occurred in the U.S. But British experts fear it is only a matter of time before it happens here.

The Health Department has stressed there is no evidence that ordinary social contact with AIDS patients poses a risk. However, it has been urging doctors, nurses and other

## **AIDS alert for health workers**

health workers to maintain 'sensible standards of hygiene at all times'.

The centre's report cites the case of a nurse with chapped hands who became infected.

● More than 500,000 people applying to migrate to America each year are to have mandatory tests for AIDS in their own countries, Attorney-General Edwin Meese announced.

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# Aids: 'Govt. drive adding to fears'

By SENAN MOLONY  
THE Department of Health's Aids information campaign has come under new attack — this time from Cairde, the support service for those affected by the disease.

In an open letter to Health Minister Rory O'Hanlon, the group claims that dire picture of a slow, agonising death painted by the television commercials is adding to the fears and social isolation of those already diagnosed as anti-body-positive.

The honorary general secretary of Cairde, Dr. David Magee, said that the present campaign did not cater for the feelings and interests of those

## Plea to Health Minister by group

who were infected with the Aids virus, now numbering at least 600.

"While we recognise the importance of good information, we believe that this campaign shows no compassion."

He added that the phrase "Aids — don't

affected by Aids. It consists of 20 trained volunteers and they are currently counselling six people with the killer virus, including drug abusers, haemophiliacs and homosexuals.

Today, the PRO for the group, Mr. Carl Berkeley conceded that the Government may be in a "Catch 22" situation — it has to make the message hard enough to be effective, and yet some people are likely to be offended by the explicit or harsh form of advertising.

"However, when somebody is diagnosed as body-positive, they experience great feelings of loneliness and isolation. And then they have to hear themselves talked about as 'pools of infection' moving through society."

"You can also imagine



DR. RORY O'HANLON.

Campaign slated.

bring it home" almost implied a betrayal of their families and friends by those who had been infected.

Cairde was founded in September 1985 to befriend and support persons

the effect on someone with the virus of these grim warnings about slow and painful deaths. It may drive people who are tested positive underground, or worse, alienate them so much that they don't care what happens."

Mr. Berkeley said that the Aids campaign was also characterised by criticism of sexual irresponsibility, but this could imply that people who became infected were somehow themselves to blame for their illness.

"There is also much made of guilty and innocent victims, which is highly unfair to people who are trying to come to terms with the threat facing them."

What Aids-infected people wanted, he added, was not pity, but some modicum of public understanding for their plight.

# Campaign on AIDS 'balanced', says O'Hanlon

Both the National Co-ordinating Committee on Drug Abuse and the Central Strategy Committee on AIDS would be closely monitoring developments in other countries in relation to both these issues.

Mr Emmet Stagg (Lab, Kildare) said that the official booklet and advertising campaign on AIDS was simplistic, moralising and ineffective, and had been criticised by those directly involved with AIDS sufferers and people at risk. He asked what funds were being provided for the voluntary counselling services who were doing excellent work in preventing the spread of the virus.

Dr O'Hanlon said he did not accept that the campaign was limited. It was well-balanced, and the Government was following the line adopted in other European countries in directing it at the whole population and not just at high-risk groups, because there was more

and more evidence that AIDS was spreading throughout the heterosexual community. A strong condom effectively used was the best protection against AIDS and that issue was not avoided in the booklet.

Asked by Mr Stagg if he accepted the WHO recommendation that there should be an anonymous testing service for people at risk, Dr O'Hanlon said he was reviewing facilities in each health board area for sexually transmitted disease clinics to ensure that facilities would be available for anyone who wanted an anonymous blood test to have it.

Replying to the Labour leader, Mr Dick Spring, the Minister said he did not believe that AIDS should be compulsorily notifiable because that might lead to people who should turn up for testing not doing so.

Asked by Mr Alan Shatter (FG, Dublin South) why the official advertisements suggested people should seek

medical advice on the use of condoms when everyone over 18 could get condoms and did not need to consult a doctor about them, Dr O'Hanlon said condoms were not 100 per cent effective. They reduced the risk of contracting AIDS but did not eliminate it.

When Mr Stagg pressed the Minister to say how much had been allocated to health boards to fight the disease, the Minister did not reply.

Replying to Mr Gregory the Minister said the testing programme showed that just under 20 per cent of drug abusers tested were affected by the AIDS virus.

A total of 9,339 tests had been carried out and 590 had been found positive to the AIDS virus, the Minister said. And, he added, the health boards were setting up local AIDS programmes. The staff to do this were now in place in all the health boards following a series of training seminars.