

# National HIV & AIDS Archive

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# Rise in heterosexual incidence of AIDS

By Dick Ahlstrom,  
Science Correspondent

THE AIDS virus is now firmly rooted in the heterosexual population in the US, introduced through intravenous drug abuse, according to a visiting US specialist. She believes the US trend is likely to be repeated here given our high per capita incidence of such drug abuse.

Up to 170,000 are expected to have contracted the virus in the US by 1991, including an increasing number of women, indicative of the breakout of the virus from the homosexual into the heterosexual population. And researchers there are pessimistic about the creation of an effective vaccine in the near future.

A public lecture on AIDS was given last night by Dr Mary Guinan, assistant director for science at the Centers for Disease Control in Atlanta, Georgia, hosted by the Royal College of

Physicians of Ireland. She believes that women are at particular risk as AIDS moves into the heterosexual community as women are more likely to pick up the virus through intercourse than men.

Speaking to *The Irish Times* she stressed the importance of treating AIDS as a health issue and not a moral issue.

There are now 45,000 reported cases of AIDS in the US she said, 20,000 of them reported this year alone. "It is continuing to grow and we don't see a peak in sight. What we are tracking is five years behind the epidemic given the long incubation period for the disease. People say that it is not reaching the heterosexual community, but in the next two or three years we'll be tracking that."

She cited a 1986 study of pregnancies in a Brooklyn hospital, where women were tested for exposure to HIV, the virus that

causes AIDS. It showed that two per cent of all pregnant women tested were HIV positive.

"The Government position in the US is that it is still only in the 'at risk' groups," but clearly the virus is moving via intravenous drug users into the general population she said. Of the 3,000 female cases of AIDS reported in the US so far, half of them were intravenous drug users. A quarter of the total were infected with HIV via intercourse as heterosexuals, in contrast she said with the incidence in heterosexual males at two per cent.

She believes that HIV is now endemic in the intravenous user population and, in turn, is moving into the general population. "This is where it is coming from. Once the prostitute population is significantly infected, because so many drug users are prostitutes, then that's when all hell will break loose in the heterosexual population."

The cross-over comes via "intravenous consorts," hence the danger, she believes, for Ireland given the comparatively high proportion per capita of intravenous Drug users. Yet people continue to ignore the health risks and implications.

She says morale amongst US researchers seeking a cure or a vaccine against the virus is very low at the moment. HIV changes its chemical make-up readily via mutation, she says, making it difficult to develop a useful vaccine. "That is why we should be more into prevention. What will we do, wait until the levels in heterosexuals rise as high as in the risk groups before we do something?"

Ireland has had 26 reported cases of AIDS and 13 AIDS-related deaths. Over 630 people have been identified as being HIV positive here to date, over half of them intravenous drug users.

## Technology

### A Special Summary and Forecast Of Scientific Developments Affecting Business

NEW YORK

Glowing blue dots on a black computer screen define an oblong, undulating shape that rotates to reveal hidden bumps and hollows. It is a computer graphic rendering of a protein similar to one found in the deadly AIDS virus.

Next, a smaller, green blob moves in and nestles into the hollow curve of the

## Computers & AIDS

protein like an asymmetrical lock and key. If this were a real biochemical encounter, instead of a computer simulation, the AIDS virus protein might be blocked, and the AIDS virus itself rendered harmless.

"We want to find a molecule that will fit the bumps and grooves (of the viral protein) like a three-dimensional jigsaw puzzle," says Renee Des Jarlais, a student in pharmaceutical chemistry at the University of California at San Francisco, as she puts the computer through its paces.

"The goal is to make the most specific blocker possible," she says, not only in terms of its shape, but also its chemical attraction to the target.

"Otherwise, it might interact with things your body needs to work, instead of with the virus, and thus create a toxic reaction."

The term "computer-aided design" usually conjures up a vision of electronic engineers devising a new microchip on a computerized drawing board. But CAD has come to biomedical research, too. This is how some scientists are conducting the search for the drugs and vaccines of the future, using computers to help them "see" the enemy better, find targets of opportunity, and design potent new weapons to treat and even to prevent AIDS.

UCSF isn't alone. The National Institutes of Health, in what may be the first big effort to apply these new techniques to battling an epidemic, just awarded \$25 million over five years to UCSF and five other institutions: Yale, Harvard, the University of California at Los Angeles, SmithKline and Agouron Pharmaceuticals.

George Kenyon, chairman of pharmaceutical chemistry at UCSF, says the project opens a new era in drug design. It's a far cry from techniques that often involve searching the world for naturally derived drugs in such diverse sources as ocean sponges or South American tree bark.

Prof. Kenyon, who holds a doctorate in chemistry, has assembled a team that first will manufacture a lot of AIDS virus protein using techniques of gene splicing. Then his team will bombard the protein with X-rays to determine its structure.

Once this is known, researchers

searching the world for naturally derived drugs in such diverse sources as ocean sponges or South American tree bark.

Prof. Kenyon, who holds a doctorate in chemistry, has assembled a team that first will manufacture a lot of AIDS virus protein using techniques of gene splicing. Then his team will bombard the protein with X-rays to determine its structure.

Once this is known, researchers can model the structure of the protein on the computer screen and tailor inhibitors—that is, molecules that latch on to the virus and incapacitate it.

The first target on the virus the Kenyon team will try to attack will be ribonuclease "H"—an enzyme believed to be crucial to the life cycle of the AIDS virus.

The professor warns that the venture probably will take 10 years to synthesize, refine and test its custom-made molecules. But if the techniques work, he feels confident that the tools of computer-aided drug design "can be used against other viruses that come along to plague mankind."

Some scientists use computers differently in vaccine design. Instead of picturing particles to knock out the virus in an infected person, they might use the computer to predict how to rally the body's immune defenses to fight an invasion by the AIDS virus and prevent disease.

Jay A. Berzofsky, a researcher at the National Cancer Institute, a unit of the National Institutes of Health, and colleagues including Charles DeLisi, chairman of the Department of Biomathematical Sciences at Mount Sinai in New York, have published papers on using computers to predict which protein fragments on the AIDS virus might be the most capable of sparking an immune response that could protect the body against contracting AIDS.

Dr. Berzofsky has a notion that the protein fragments most likely to succeed in sparking such an immune response would be those that fold up into a helix, or corkscrew shape, with alternating oily and watery segments. This notion was statistically validated by computer analysis of a large number of protein fragments known to activate immunity. Since certain immunologically potent proteins are built this way, he reasoned that the corkscrew-shaped protein fragments on the AIDS virus, in combination with certain other proteins called MHC antigens—best known for their role in "transplant rejection"—would more readily activate the host's T-cells, which act as a group of immune sentries.

Dr. Berzofsky asked the computer to predict mathematically the areas on the virus where protein fragments might fold up into these corkscrews.

Next, the researchers vaccinated mice with synthetic, non-infectious versions of these corkscrews and were able to spark both an increase in the number of T-cells and their immune powers so that the cells were later able to rally against the outer coat of the real virus in a test tube. More experiments are planned to look for a similar increase in the killer cells thought necessary to wipe out the AIDS virus.

But Dr. Berzofsky, too, cautions that this may be a 10-year endeavor. "The computer analysis doesn't take long," he says. "It's the experiments that take time. . . . Eventually, you'll look at a model where you can test for protection (against the AIDS virus)—in chimpanzees and, eventually, in people."

—MARILYN CHASE

Evening Herald  
2nd December 1987

# AIDS: young taking too many sex risks

By SENAN MOLONY  
A FAMILY planning doctor expressed dismay today at the reluctance of young Irish people to use protection during sex to guard against the AIDS virus.

"There has been no noticeable increase in the sales of condoms, either here or in Britain," said Dr. Sheila Jones, chairperson of the Irish Family Planning Association.

"In fact young people have gone off the idea of using condoms and prefer to rely on the pill. We also have young men who are not at ease using

condoms, who don't really know what to do with them."

As a result there were "a lot of young people who were not bothering to use any form of contraception at all, she said. And they were not just leaving themselves open to pregnancy, but also to the lethal AIDS disease.

Youngsters were still taking risks, out of a sense that "it will never happen to me," she said.

In Britain, a new survey reveals that fewer people are prepared to have sex with strangers as an anti-AIDS Puritanism takes hold.

But Dr. Jones said she didn't know whether one-night stands would become a thing of the past in this country.

"We have to encourage people to use condoms, and everyone should wake up to this fact. We have a very young population, and so the dangers are very real."

She doubted whether young people would be prepared to quiz their lovers about their past sexual histories. "My God, when you're 18, you don't even think to ask things like that."

# Mums in Aids breast-fed warning

AN AMERICAN government scientist has called for more study into the possibility that women may spread the deadly Aids virus to their babies through breast milk.

He warned that if breast milk could spread the virus easily "we're in big trouble" in developing nations. While 62,445 cases of Aids had been reported officially worldwide up to mid-October, many more people could have the disease, Dr Thomas Quinn told a convention of tropical disease experts in Los Angeles.

The World Health Organisation

estimates that five to 10 million people worldwide are infected by the virus, although most have yet to develop symptoms and a million will develop Aids by late 1991.

"Aids has the very real potential to become the world's number one medical problem in terms of death within five to 10 years," said Dr Quinn, who studies international aspects of Aids for the National Institute of Allergy and Infectious Diseases.

There is some evidence the virus can be passed to babies when they are breast-fed, although more research is needed to learn if, and how efficiently, the virus may be spread

in that manner, the scientist said at the annual meeting of the American Society of Tropical Medicine and Hygiene.

If breast milk can spread the virus easily, "we're in big trouble" in developing nations, he said.

That is because breast milk is the main nutrient for millions of babies in nations where infant formula is unaffordable, and because mothers' milk contains antibodies that protect millions of babies from bacteria that can cause severe diarrhoea and subsequent death from dehydration, the scientist said.

As a precaution, the US Center for Disease Control recommends against breast

feeding by Aids-infected women in the US.

But such a recommendation is premature in developing nations, where mothers' milk now saves many babies from starvation and fatal diarrhoea, Dr Quinn said.

Last year, Dr Elizabeth Hillman, a Canadian paediatrician who works for UNICEF in Africa, said she believed the Aids virus could be spread through mothers' milk.

Meanwhile, in San Francisco, a doctor and his wife have filed a \$500 million lawsuit, claiming a virus the woman developed that is common to Aids patients she treated while working as a nurse, caused their son's birth defects.

THURSDAY WOMEN

BEHIND THE LINES

Polly Toynebe

Carolyn Leibovitz, right, with Andy Stinus at the centre. Picture by Anthony Stinus

Somewhere in the Bronx, a daycare centre does its best to cope with the child victims of a modern-day plague. The carers face every conceivable problem

# The Aids babies

communities, say staff at the centre, who talk a great deal to the mothers. "These women are powerless, and culturally unable to insist men use condoms. They do not have the power to demand it. Wearing condoms protects the woman more than the man. It is extremely rare for a man to contract it from a woman. Many of the mothers decided to conceive, knowing they were infected, and knowing there was a 50 per cent chance their child would be infected too. They want children, and 50 per cent doesn't seem bad odds to them."

Dr Arvo Rubinstein, who sets up this daycare centre, is one of the early heroes of the Aids epidemic — and there were precious few of them. He is a paediatrician in the Bronx and black and Hispanic from a district in New York that defies belief for squalor and deprivation war, every other tenement house burnt out, people sitting in the street, selling old odds and ends off cardboard boxes. Few people I met in Manhattan had ever ventured out there even to have a look. Back in 1981, Rubinstein began seeing the children of drug addicts with severe immune deficiencies, and diagnosed them to be suffering the same strange disease that was attacking the gay community. He was an eminent paediatric immunologist but like a few other far-sighted doctors of that time he could not get anyone to believe his diagnosis.

Doctors and health officials at the time were convinced the new disease was "only" a gay syndrome — they thought it was caused by peppers, a drug gone toxic — or some other aspect of gay life. They dismissed his evidence that would have helped show it was a virus and that it could spread through the blood, which would have put them on to the right track much faster. The American Academy of Paediatrics would not let him present his paper at its conference, nor could he get the medical journals to publish his research; the word went round that he was mad.

As babies poured into his clinic with the same illness, he could get no one to believe him, and he saw, with horror, the dimensions of the epidemic that was starting to sweep the country. Later, when he begged for money to care for these children — when it was accepted that they were Aids cases — and his wards were full of these abandoned babies, there was no help given. It took years before he got the funding for this daycare centre.

His story is just one small part of the tragedy of the arrival of Aids. It was repeated time and again. A brilliant new book, *And The Band Played On*, by Randy Shilts, has just come out in America, an overnight bestseller. It is a modern-day *Journal of the Plague Year*. It charts the history of Aids from its arrival in America and its suspected African beginnings.

If the disease, as the *Majority* claims, was sent as divine retribution, it was not sent to strike down drug addicts and gays. It was sent to the next worst offenders. Even when haemophilia was dying all over the country, they refused to test or screen blood

from donors, because they said until the virus was actually isolated, there was no proof there was a virus. (This is equivalent to the tobacco companies' arguments that there is still no definitive link between lung cancer and cigarettes.) The epidemiological evidence was overwhelming. So was their avarice and apathy.

And, of course, the British NHS was happy to go along with the Americans long after the evidence was there for everyone to see.

Then there was the gay community. The author himself a gay reporter for the *San Francisco Chronicle*, blames the gay leaders as much as anyone. They refused to communicate any kind of education programme to warn gay men, let alone a closure of the infamous bath houses where research was showing men had a one in four chance of contracting Aids with every partner encountered there (and that often encountered four a night).

Human rights were more important than human life. Even as all round them lay dying, they found a statement saying: "We should never forget we live in a homophobic society, or that homophobia is the major threat to our health." Gay newspapers were printing editorials saying: "Advice on safe sex, while perhaps well-meaning, is actually collaboration with the death regime that delights in blaming ourselves. The myth of safe sex instils the finger pointing when anyone of us does come down with the disease." The few brave gay leaders who tried to make them see sense were hounded out as closet self-hating homosexuals. There was no education campaign.

The disastrous political failures were more familiar and less, more expected. Public health officials did nothing, afraid of panic when panic was what was needed. The Government lied about the nature of the disease, started all the researchers, even made cuts in their funding, while making extravagant spending claims. The researchers had to appear before Congressional committees swearing they had all the money they needed, even when the very same day, they were sending emergency pleas in private memos because they could not cope. But as government employees they had to toe the line. All this was later exposed through Freedom of Information demands for documents.

The disease ransacked through the land, and the world, and the people in positions to take action were jockeying for power, turning a blind eye, passing the buck, scoring off their enemies or keeping their heads down. The media neglected it, focused on the wrong things, never asked the right questions, and were too long embarrassed by it. While it was an exclusively gay disease, they barely covered it at all.

And public attention waned. The disease is no less terrifying than it was a year ago. But venereal disease rates, the best indicator of levels of promiscuity or unsafe sex, fluctuate with the amount of Aids news in the media, or government publicity. Media boredom with an old news story is one of Aids' greatest allies.

This book is a sane, thorough and devastating indictment of how the disease was allowed to run unchecked for so long. Have lessons been learnt? Would the world handle such an epidemic better next time? The depressing answer is, probably not.



*And The Band Played On*, by Randy Shilts. Published by St Martin's Press, USA. To be published by Penguin next March.

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## Testing applicants for AIDS opposed

BY JIMMY BURNS, LABOUR STAFF

THE ENGINEERING Employers' Federation has become the first leading UK employers' organisation to publicly oppose screening of job applicants for the AIDS virus.

In the most detailed advice to employers on the employment implications of the disease since the guidelines issued by the Government last year, the EEF tells its 5,000 member companies: "... the many and serious limitations of pre-employment screening and the problems such a policy would present for a company will in any case far outweigh any apparent benefits to the employer."

The limitations and problems which the EEF identifies with pre-employment screening include:

- It will have a "devastating" impact on an individual who has a positive result from an HIV test.

- Would make recruitment more expensive and lead to delays in making appointments.

- Undermine action by a company to reassure existing employees concerning safety and infection at the workplace.

In its document *Employment Implications of AIDS*, the EEF says that any approach to the problem will need to be flexible, and as with other policy aspects will need "reviewing and updating" in the light of new information.

However, the EEF stresses that education of the workforce should be "central" to the company's response to AIDS.

"Even though there is much media coverage there will still be a need to reassure employees and to dispel some of the myths surrounding the disease," the EEF says.

It notes that while pressure to

dismiss an employee infected with AIDS may arise from "lack of information," such a dismissal would create a "dangerous precedent."

The EEF's decision to publish its guidelines was welcomed yesterday by the CBI, which in recent months has been pressing employers to follow the example of trade unions in adopting a more open and positive response to the disease.

It is understood that the CBI is currently drawing up a unique joint policy statement on AIDS with the TUC, which will be published earlier next year and distributed widely within industry and the public sector.

*The Employment Implications of AIDS. Engineering Employers' Federation, Broadway House, Tothill Street, London SW1H 9NQ. Non-members £5.00, EEF Members £2.50.*

# Irish subject to Aids test

By TIM HASTINGS

IRISH applicants for work permits in America will in future be given an Aids test as part of their general medical check-up.

The change under a new immigration law is also likely to affect applications for "Donnelly visas" who have not yet had their cases finalised.

Every immigrant who is applying for legal or permanent resident status will be tested, including illegal aliens applying for amnesty under the 1986 Immigration Control and Reform Act.

Applicants can be tested either in the

United States or at the US Embassy where they have applied for the visa.

Sources in Dublin said the test for Aids is part of a "general medical".

Applicants whose tests for Aids proves positive will be denied entry into the US except in rare cases, officials made clear in Washington.

More than 3,000 Irish people were granted the option to apply for "Donnelly visas" under the worldwide scheme announced by the US last year.

But so far not all those who were registered as being entitled to apply for visas have done so.



# HEALTH CARE WORKERS AIDS RISK 'VERY REAL'

By DAMIAN McHUGH

**THE RISK** of contacting HIV infection as an occupational hazard is almost entirely confined to health care workers, a conference in Dublin was told today.

"The risk in health care workers is very low but very real," Zachary Johnson of the Eastern Health Board told the conference in Malahide.

"The risk may be largely eliminated by the rigorous enforcement of standard blood and body fluid precautions in dealing with all patients," he added.

Mr. Johnson was a guest speaker at the conference "AIDS in the Workplace" organised by the Institute of Health and Safety Managers which was opened this morning by the Minister for Labour, Mr. Ahern.

Mr. Johnson said that, generally, if one avoided unprotected sexual encounters and the sharing of needles and syringes with ones colleagues, there was no risk of picking up HIV infection at work.

"It follows from this that there is no justification for

discriminatory activities in relation to workmates who may be infected with the virus."

A. M. Briscoe, Safety Executive of the FUE which recently issued guidelines for its members on AIDS, said the guidelines acknowledged that specific questions would arise about the implications for employment.

"This will be a matter for each employer to consider having due regard to all the relevant facts and circumstances," he said.

Most sources suggested that there was no obligation on a person to disclose their infection or submit for medical tests but in occupations where routine medicals formed part

of the contract of employment, the approach would be different.

"In such cases, consideration will have to be given to the person's state of health — some people may not be well enough to continue working," he said.

Mr. Briscoe said that if AIDS becomes as widespread as many people suggested, then concern would exist with insurers and administrators of privately managed pension plans, medical plans and mortality benefit arrangements.

"It is unlikely that AIDS as a relatively new disease which has a high fatality probability, will be overlooked in assessing the applicant's medical history when considering inclusion in such plans," he added.

# Victim said he had AIDS, court told

A Dublin father of two accused of the murder of a homosexual 'strangled' him because the victim said he had AIDS after they had sex it was alleged at the Central Criminal Court yesterday.

The court heard that Patrick Dunphy, allegedly made a statement admitting he killed Bryan Begley after the pair had gone to a city guesthouse.

It was the fourth day of the trial of Dunphy (26), an unemployed builder's labourer and father of two, Cushlawn Park, Killinarden, Tallaght, who has pleaded not guilty to the murder of Bryan Begley (21) from Stillorgan, Co. Dublin.

The prosecution alleges Dunphy strangled Mr. Begley with part of a bed quilt during a homosexual session at Doyle's guesthouse, South Great George's St., in

the early hours of May 14 last.

Yesterday Det.-Insp. James McHugh, Pearse St. said after caution Dunphy said: "Picked him up. Went back to the bed and breakfast. Went back to the room. Messing about."

The Inspector said that Dunphy said Mr. Begley had a leather belt which he used to tie him up with. Dunphy said to him: "Something happened. Thing about AIDS. That was it. I went spare."

Dunphy then said: "He said he had antibodies. I was after giving him a blow job. The thing around his neck was supposed to have been a gag. I twisted it around his neck."

Detective Inspector McHugh said he asked Dunphy to make a written statement and he agreed. After the statement was made Dunphy said: "It was

the thought of my family in my mind. If I had AIDS how could I touch my wife or children?"

According to the statement the man said to Dunphy: "Do you know I have AIDS. I am a major carrier. I have AIDS antibodies."

Dunphy said: "I then cracked up. I went spare. I pulled the cloth tightly around his neck."

The trial before Mr. Justice Johnson continues today.

**Irish Times**  
**4<sup>th</sup> December 1987**

### AIDS

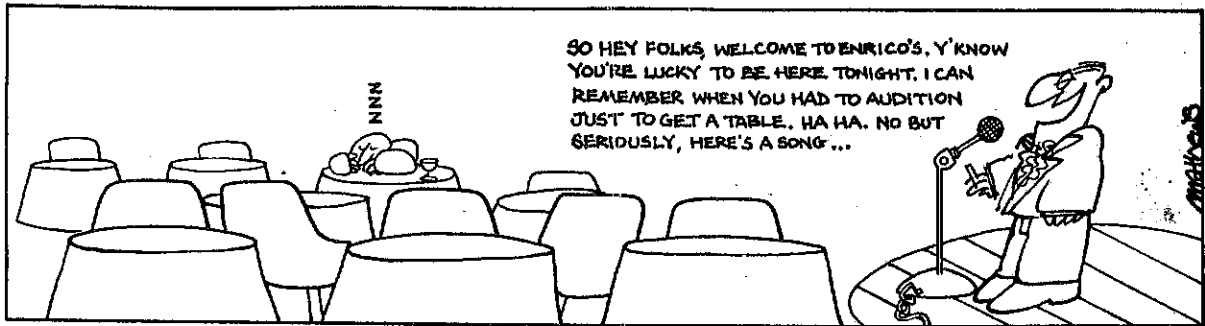
Sir, — When will people like Mary Kennedy (letters, November 30th) learn? Pop stars and adolescents are interested in nothing but sex, drugs, and rock 'n' roll and an essential qualification to fulfil before appearing on Top of the Pops is to swear to promote the cause of corrupting teenagers, seems to be the opinion of Ms Kennedy and others.

There are two types of teenagers regarding sex — 1, those who will (which is their business — not the business of the Irish Family League) and 2, those who won't. If it's declared that using a condom will help prevent AIDS this does not mean that we all rush out: "Wow! Bob Geldof said a condom helps prevent AIDS, let's all get down to the chemist, arm ourselves and grab the nearest fella."

It seems to me that it is the likes of Mary Kennedy who needs to be educated in this area. Condoms have a five per cent failure rate as regards birth control (usually blamed on misuse). However, if used during any sexual contact they will prevent sexually-transmitted AIDS: 100 per cent. So there! — Yours, etc.,

SARAH CAREY (16),  
Newcastle,  
Enfield,  
Co Meath.

DAVID HANLY



# San Francisco is over and out

**C**ATHY is doing a double MA — in Administration and Nursing. She is working three full nights a week at El Camino Hospital, 30 miles south of San Francisco. She is 39, and has four children from 17 down. She has no maid. Her husband commutes every day to his job as Alumni Relations Manager at the University of San Francisco.

She says he's a saint. He needs agreement; the reverberating sentence in the household for too

long has been, 'Mom's gotta go to work again.'

This is not what is called a 'California marriage' — where one spouse works the week in, say, Sacramento and spends the weekend with his family in Los Angeles — though it is a variation of it. It also has a much greater chance of survival than most California marriages.

There's deep religious conviction in the home, expressed quite spontaneously by the children. Becky, aged 17,

desperately wants to get into Boston College which is three thousand miles from home. Why so far? 'Well, it's a Jesuit College, and they lay strong emphasis on the religious aspect of education, and that's very important to me. Also, they have excellent courses in special education, and that's what I want to do; I want to work with the deaf, the blind, anyone who needs special care.'

Her mother's phone rings day and night, and it's always the same bad news: a nurse has reported sick, and she's got to find another one, or else come in herself. Her husband finds it strange that the boss should have to turn up when a worker falls to show, but Kathy is more than a mere boss. 'We have a huge morale problem in the profession. Grocery clerks are paid more than nurses in this country now. The hours are terrible, the work gets more dangerous, and yet nurses can't get a decent wage. They feel that nobody cares about them, and they're losing the pride that they had in their profession.'

So why is the job becoming more dangerous?

'Because of Aids. The more we find out about the disease, the more we realise how little we know about it. We are still not sure how it is transmitted, there's a lot of fear about. It's got to be the stage now in our hospital where we are ordered to assume that every patient has Aids, until a full screening has been done.'

'Can you imagine? It's now suspected that sputum may be a carrier, so that now, when a patient gets a coughing fit and you want to ease his discomfort, you must wear gloves and a mask. The gloves might be 20 yards away, you may have a slight lesion in your finger...'

And why doesn't she carry the gloves with her?

'Because we haven't enough to go around. The reason for that is that there's a shortage of latex. And the reason there's a shortage of latex is that most of it is being used to manufacture condoms. So that people won't get Aids...'

The paper this morning carries the story of the five-year-old son of an Irish-American Roman Catholic couple. He had an accident two years ago, needed a transfusion, was given infected blood. His parents, holding their doomed child in arms, are angry and bewildered. An estimated 600 children have become infected with Aids in the US, 400 of them have now died.

Enrico's at 6pm, the 17 marble-topped tables — each with its own fresh carnation — are ready for customers. Ton



David Hanly

**'Not one of the people working in any of those buildings does anything for other people'**

years ago, each table would already be taken by rubber-neckers who loved to see and be seen in the throbbing heart of San Francisco's North Beach area. Tonight, there is no company but Enrico Sanducci himself, the grand seigneur of North Beach and garrulous host of Broadway.

This is the man who came up from Bakersfield, 300 miles to the south, to become a concert violinist. He found his commitment did not match his ambition, and when in his 20s he opened the Hungry I club, giving work and dollars to unknowns.

It was here that Mort Sahl first set people's teeth on edge; that Bill Cosby test-marketed his spiel, and where Barbra Streisand, a gawky teenager with an extraordinary voice and plenty of *chutzpah*, was first seen and heard. The list is endless.

When he left the club behind and opened Enrico's emporium smack in the middle of North Beach, the world was beating a path to the Golden Gate city. There followed three decades of roller-coaster excitement, fun, difference.

Now it's over. The roller-coaster has ground to a halt. Charlie McCabe's column is no longer in the *Chronicle*; he fell, broke his enormous skull and is now in his grave. Dead too is Enrico's regular Richard Brautigam, who just 'gave up'. Others have departed one by one, in various degrees of disaffection.

**S**o tonight, Enrico Banducci — looking physically untouched by the decade that has passed — is a deeply disenchanted man. 'I hate what has happened to this town. There's no soul here anymore, no spirit, no culture. And I don't mean going to the opera, no sir; I mean a young painter produces a dozen new paintings, a marvelous new talent, and he exhibits them, you think he gets a mention in the papers here? Not a goddamn paragraph. Not a line. But a footballer gets a goddamn hangar! and they fill two pages with it.'

It is admitted by all that for a town with so many sophisticated people, San Francisco has two of the worst newspapers in the world.

'But that was always the case. The real trouble is that the money makes a town, and the place and have almost completely taken over.' He lifts his perpetual black beret from his head as if to fling it on the terrazzo floor, but points it instead straight down at the pyramid-style building which dominates the city's skyline.

'Look at it,' he says, with passionate loathing. 'Empty. There's nobody in that place. There's no trade going on in those buildings. Not one of the people working in any of them actually does anything for other people. They just shift papers around all day. Ach,' he shakes his head, 'if I can get out, I'll go.'

**S**o will Ed Moose, who owns the charming Washington Square Bar & Grill. 'There's nobody around to laugh with or at anymore. Every great character who is gone has been replaced by ten yuppies. It's time to move out.'

And so it is also for my host Bob on Pine Street. But for him the departure will be softened. The house which he bought for a song in an unfashionable area 20 years ago has suddenly become worth a fortune. He has transformed it into three flats, and has his eye on Mexico. 'We have sucked the place dry. There's nothing here now but yuppies. They can have it.'

And in Harry's — the 'hottest new bar in town' — it's all borne out. Wall-to-wall yuppies, arrogant and self-loving, knowing everything about prices and nothing about people. The noise is intolerable. A filofax appears from a monogrammed attaché case and is placed on the bar counter.

Time to move on.

# Insurer admits AIDS discrimination

By Kathryn Holmquist

DISCRIMINATION against people who test HIV-positive, and also against those at high risk of being infected by the AIDS virus, was advocated yesterday by Mr J. L. Rennie, Chief Executive of Abbey Life Assurance (Ireland) Ltd.

At a day-long conference on "AIDS in the Workplace" in Malahide, Co Dublin, Mr Rennie candidly admitted the methods by which Abbey Life and other insurance companies screen people for AIDS.

"Life assurance companies need to protect themselves against the AIDS epidemic and do so through a discriminatory underwriting process. This process, however, is not necessarily well received by individuals, medical practitioners, governments or activist groups. This, as insurers, we are prepared to live with," Mr Rennie said.

The screening he said, con-

sisted of an initial question on insurance proposal forms which asked if the applicant had received medical advice, treatment or had a blood test for AIDS or an AIDS-related condition. He also asked if the applicant had any reason to believe that as a result of his or her occupation or lifestyle he might be exposed to this disorder.

A no reply would result in normal underwriting treatment, but a yes would be followed by a second questionnaire of "very specific and very personal questions". Since there was an incentive for the applicant to lie, their truthfulness would also be assessed.

The applicant would be asked if he was a homosexual or bisexual man, an intravenous drug user, a haemophiliac or a sexual partner of any of those groups.

The applicant's doctor would also be asked about the applicant's lifestyle. Mr Rennie said it was "interesting" that so many

doctors objected to being asked such confidential information.

"I think the attitude of insurance companies refusing to insure anyone if they've had an HIV test is disgraceful, discriminatory and stupid — and it will prevent nothing in the end," Dr James Walsh, assistant chief medical officer at the Department of Health, said. Moreover, mandatory testing would never happen as long as he was around.

One conference participant, a haemophiliac who had tested HIV-positive, said that he could not get life assurance and that when he died his wife and children would be left with nothing. Mr Rennie replied that this was the nature of the life assurance business.

Dr Manuel Carballo, chief of research and development for a special programme on AIDS at the World Health Organisation, said that further infection could be prevented, and that it was essential that AIDS sufferers re-

ceived support and be allowed to continue working to support their families, since the disease could be exacerbated by stress.

Mr Rennie was alone in his view that employers were justified in removing workers who had tested HIV-positive from employment if they had been ostracised by workmates, or if they discovered that an employee had tested HIV positive "caused serious industrial unrest in the workforce."

Such a discriminatory situation would be the result of irrational anxiety and fantasy based on misinformation, Ms Patricia O'Donovan, of the Irish Congress of Trade Unions, said. The employer must address this by educating the workers.

Only health care workers could catch AIDS at work, and even they were at minimal risk Dr Zachary Johnson, community medicine, Eastern Health Board, said.

Evening Herald  
8<sup>th</sup> December 1987

## Aids on increase

AIDS killed 41 people in the United Kingdom last month. Department of Health and Social Security statistics, released yesterday, show 1,170 Aids cases to the end of November, of whom 665 have died.

This compares with 1,123 cases recorded to the end of October, with 624 deaths. Thirteen Aids sufferers were children of infected mothers. Six have died.

## **Priest got AIDS from sex**

A Jesuit dying of AIDS has told US Church officials he probably contracted the disease through a sexual relationship with another man.

Parishioners in Portland, Oregon were told Fr. Peter Davis, 42, had AIDS. he has served as parish priest for the last two years.

More than 400 parishioners, who knew only that they were attending a prayer service for their pastor, sat in near silence as they were told the news.

Fr. Davis discovered he had AIDS last month, said Fr. Brad Reynolds, spokesman for the Jesuits in the Northwestern US.

## Gay victim 'did not have AIDS'

A JUDGE was told yesterday that a young man killed in a guesthouse after a homosexual sex session did not have AIDS.

Mr. Justice Johnson was hearing evidence in the Central Criminal Court prior to sentencing father of two Patrick Dunphy (26) of Cushlawn Park, Killinarden, Tallaght, Co. Dublin.

He has pleaded not guilty to the murder of Bryan Begley (21) of Beaufield Park, Stillorgan, Co. Dublin at Doyle's guesthouse early on the morning of May 14 last.

Last Friday he changed his plea to guilty of manslaughter.

During the trial the jury had heard of an alleged statement by Dunphy in which he said he had strangled Begley — after a sex session — when Begley said he had AIDS.

Sentence was adjourned until today because a defence witness was unavailable.

In court yesterday Det. Insp. McHugh agreed with Mr. Michael McDowell S.C. for the State that Mr. Begley had gone willingly to the guesthouse with Dunphy.

He also agreed that there had been a fairly considerable amount of drink taken, particularly by Dunphy.

There was nothing to suggest that prior to the immediate cause of death that any violence was involved.

He said medical tests had shown Mr. Begley did not have AIDS.

Det. Inspector McHugh told Mr. Justice Johnson that Dunphy had been full of remorse and had never intended to kill Mr. Begley. "It was a spontaneous reaction on his part."

He added that he wished to inform the court that Mr. Begley's parents "are full of compassion and forgiveness in relation to what happened to their son. They are very forgiving people."



# Tibetans plan potion for AIDS

**TIBETAN doctors in the remote Himalayan foothills are pouring over ancient Buddhist scriptures to find a cure for the killer disease AIDS.**

Doctors led by the Dalai Lama's personal physician living in exile in north India are experimenting with a secret potion based on mercury which they hope will gain acceptance in the West. But they lack facilities for blood tests and say they are hampered in research because there are no cases of Tibetans having contracted AIDS.

There is no known cure for AIDS, which destroys the body's defences against disease. More than 60,000 people worldwide are known to have AIDS, which is transmitted sexually or through the blood.

Tenzin Choedak (61), personal physician to the exiled Tibetan spiritual leader, who took his theories to the United States last July, said AIDS destroys the 'Dhang', or vital essence of life — a clear fluid in the centre of the heart.

## DEGENERATION

He told the Harvard Medical School and the University of California, San Francisco, that AIDS is one of 18 diseases which Tibetan scriptures prophesied would emerge during 'an era of degeneration'.

Choedak has so far produced four prescriptions based on 'Tsothel', a potion known only to him and one other doctor who fled with 100,000 Tibetans to India after an abortive uprising in Lhasa against Chinese rule in 1959.

Two batches of Tsothel, made of 17 metals and minerals, have been produced so far in India, said Namgyal Lhamo Takhla, director of the Tibetan Medical and Astro Institute. "It takes up to four months to produce each batch and it is very expensive," said Takhla, the Dalai Lama's 45-year-old sister-in-law.

"We had to keep the prepa-

ration secret because Tibetan medical scriptures warn that the presence of visitors may affect its potency. In 1982, when we made the first batch of Tsothel outside India, everyone in Dharamsala knew about it and there was great excitement," she said.

But two of the doctors involved in the preparation died when their car fell off a cliff along the winding roads of Himachal Pradesh state. "Many others involved in the preparation also fell ill and there were mysterious accidents. So this time we told no one," said Takhla.

Choedak first prescribed Tibetan medicine last year to two Danish and two American homosexuals, and a West German child who had contracted AIDS through blood transfusion. One of the Americans was reported to be progressing well until he contracted pneumonia and was admitted to a New York hospital where doctors ordered him to stop taking the Tibetan medicine. He died shortly after.

Choedak also treated 65 American AIDS patients during his U.S. visit, but Takhla said they could only follow up nine of them and were still awaiting results to gauge their reaction to the Tibetan medicine.

# Tests on Aids drug

By Andrew Veitch,  
Medical Correspondent

Tests of a new Aids drug originally designed to treat cancer are expected to start at St Stephen's Hospital, London, next month, it emerged yesterday.

Dr Brian Gazzard, consultant physician at the hospital, is applying for ethical approval to give the drug, Contracan, to about 20 patients in the early stages of the disease.

Laboratory tests show that Contracan can reduce replication of the Aids virus, according to Medirace, the firm set up to finance the drug's development.

The hope is that it could be used in a cocktail with the only approved Aids drug, AZT. That would mean doses of AZT could be reduced, thus cutting the

risk of dangerous side-effects, particularly anaemia, said Medirace's director, Mr Ian Gowrie-Smith.

Contracan is being developed as a cancer drug by Dr Kosta Atostolov and his team at the Hammersmith Hospital and the Royal Postgraduate Medical School, London. Results of trials involving patients at the Hammersmith and in Bristol have been encouraging, says Medirace.

The drug appears to stop cancerous cells replicating by changing the proportions of stearic acid and oleic acids within the cells.

A second Aids vaccine has been approved for testing on humans in the United States. It will be given to up to 60 uninfected homosexuals at the Pacific Medical Centre in Seattle.

Developed by scientists at Oncogen, a subsidiary of the Bristol-Myers multinational drug firm, it consists of the vaccinia virus — used for immunising against smallpox — engineered to carry a gene from the Aids virus, HIV.

The aim is to trick the body's immune system into thinking it is being invaded by HIV and so to mount defences which will protect it from infection.

However, leading British scientists are opposed to using vaccinia to immunise against Aids because of evidence that it can cause a smallpox-like disease if given to a person who is unknowingly carrying HIV.

The first British vaccine is expected to be tested on humans next year. America's first Aids vaccine was approved for testing in August.

# The AIDS war

## Team fights battle against bigotry

THE FACT that this article will not tell you where the organisation AIDS Advice is based is an indication of the problems it faces.

Such is the prejudice and ignorance about AIDS that workers fear their offices might be attacked if the address were known. But that is not the main reason for the secrecy. The group has to be sure that the confidentiality of people who make contact will not be compromised.

Inside the anonymous offices, a war is being waged on the bigotry that ensures that harassment and physical attack are sometimes the lot of those who find that they are carrying the antibodies to the Human Immunodeficiency Virus (HIV).

A three-fold attack is needed, according to Ray Gaston, the recently appointed co-ordinator for AIDS Advice.

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"People must be informed about how to avoid passing on the virus or coming into contact with it.

"We have to counter ignorance and the prejudice and discrimination suffered by those who are infected and those who are living with AIDS.

"And there needs to be support for those directly affected, including the family, friends and lovers of people with a positive test."

It is an uphill battle which is not underestimated by Ray and management committee member Moira Halliday.

They and the 25-30 volunteers who help out at AIDS Advice have to deal with the results of ignorance, hostility, fear and panic.

And while the calls they get on their phoneline are more informed now than they were two years ago, they reckon they have not been helped by the Government's information campaign or by media coverage of the HIV virus and AIDS.

"The campaigns have had very little effect in educating people about AIDS and HIV.

"The initial television campaigns were full of doom and gloom and death and dying which was insensitive, to say the least, to people already infected.

"It was also unclear what they were actually talking about. The leaflet drop idea may have seemed like a good idea but it created a lot of panic and hysteria."

"You don't create anxiety without bringing in something to answer that. The campaign raised anxiety to panic level and there was nothing to alleviate it. There was a call for a change in behaviour without saying what that should be," Moira added.

"Condoms were mentioned very briefly and phrases like 'stick to one partner' were simply used which is not facing reality."

He fears the current wave of television adverts aimed at intravenous drug users have repeated the same mistakes.

But he is more approving of the condom ads now being shown which target a specific audience which is at risk — in this case, young people — and which set out to inform without frightening.

"It's unfortunate that AIDS is a disease which is sexually transmittable because it has caused issues about sexuality which is a very complex matter."

**A LEEDS organisation is fighting against ignorance and prejudice in its battle against AIDS. DIANA MUIR reports.**

"We need to become more open about sexuality, about sex and sexual practices.

"That is going to be the best way to fight the spread of the virus and AIDS. Without that openness the job is going to be a lot harder."

Blame for the fear and hysteria which has surrounded AIDS should also be laid at the door of the media, Ray says.

Myths and stereotypes have been perpetuated like the "gay plague" image of AIDS — a disease that is now known to affect women, children, heterosexuals and homosexuals alike.

"The spread of the virus is now well within the heterosexual community. It is dangerous to call it a gay plague because that is used to whip up hatred against gay people and it doesn't actually make heterosexual men and women aware of the fact that they are at risk and should take steps to lessen that risk."

One of the most difficult misunderstandings has been the crucial distinction between being tested HIV antibody positive and having AIDS.

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Those who are tested and are found to have antibodies to the virus do NOT have AIDS.

"The majority of people who are antibody positive are fit and healthy. People with the virus are not AIDS carriers.

"They have been tested positive to the HIV virus. That doesn't necessarily mean the virus is still present in their body. It means they have at some time in the past come into contact with the virus and their body has produced antibodies to it."

At present it is not known how many people who have the antibodies go on to develop AIDS or whether everyone with the antibodies is infectious but the safe path is to assume that anyone who is positively tested should take precautions not to pass on the virus.

The difference between being antibody positive and having AIDS is crucial but the



DON'T INJECT. NEVER SHARE.

ABOVE and RIGHT — Illustrations from the Government's AIDS leaflet.

media routinely confuse the two and use the word AIDS to cover both, Ray said.

"My anger and frustration come from the fact that the Press could do such good work in the area but the media is constantly looking for the story which makes a sensational headline, regardless of the facts."

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And while it may be the tabloids that catch the eye with the "Mad killer had gay plague" headlines Ray and Moira feel that the misinformation in the quality Press is insidious because it is more subtle.

Those are the problems that AIDS Advice sets out to deal with from their basic offices where Ray is on only a yearly guarantee of funding from the ever stretched health authorities and the city council.

AIDS Advice was set up in 1985 by a group of people who were involved in health care and were aware of the need for information and support for people who were antibody positive.

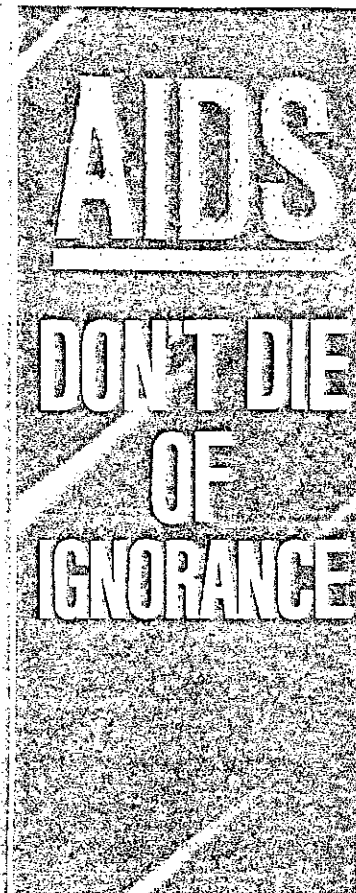
The initial contact most people have with the organisation is through the phoneline which operates four nights a week.

Some five to ten people a night call for advice from the volunteers who offer information, reassurance or practical help.

Those who want further help can come in to the office for counselling in groups or with one other person.

The organisation stocks a range of leaflets that give advice on questions like the pitfalls of having the antibody test at all, the sexual activities that are safe and those that are not and give contact numbers for more information.

The projected growth in the number of people who are antibody positive and those with AIDS means that AIDS Advice has a need for more



helpers and they are soon to try to recruit volunteers for all their work.

A very informal interview explaining the work is followed by a training course where people sort out which skills they can bring to AIDS Advice and how much time they can give.

It is during this training that people sort themselves out into those who can be the sympathetic ear on the phone and those who can help in other ways.

"Anyone who wants to help can contact us by writing to New Volunteers, AIDS Advice, PO Box 172, Leeds LS7 2BZ," Ray said.

Meanwhile the fight goes on to help, persuade and inform.

It goes on in a world where people found to be antibody positive may lose their jobs, their homes, their friends and their right to be treated as human beings.

AIDS Advice phoneline can be contacted on Leeds 44209 from 7pm to 9pm on Monday, Wednesday, Thursday and Friday. On Tuesday the line is staffed by Body Positive volunteers.

# The Aids scourge doubles in a year

THE NUMBERS of Aids victims in Ireland has doubled last year, according to the World Health Organisation.

According to the prestigious group based in Geneva, there were 10 reported cases of Aids up to October 1986 and by October of this year the numbers had increased to 19.

However, Ireland still ranks among the lowest Aids carrier country in Europe, just ahead in the league table of Malta.

By TOM REDDY

Luxembourg, Iceland and Cyprus.

Liechtenstein however, has had no reported cases of Aids.

At the top of the table however, Britain recorded 1,067 aids cases. West Germany 1,400, and France reported the highest number of Aids cases with 1,980.

The Council of Europe has just drawn up a 'scientifically justified and

effective policy to combat Aids," based on respect for individual and community rights.

The Aids charter calls for no compulsory screening of either the general population or of specific population groups, such as gays.

'Discriminatory measures should not be introduced. Voluntary testing for Aids should comply strictly with the regulations on confidentiality.'

Screening in respect of

donations of blood, mothers milk, organs, tissues, and semen should be carried out in compliance with the requirements of freely given consent and confidentiality, it adds.

The Council of Europe says at the moment there is no effective treatment of Aids only immediate preventative measure can halt the dangerous escalation of the epidemic.

THE American Medical Association called Wednesday for a coor-

minated education campaign to combat Aids, dismissing past efforts by government and private groups as inadequate.

A report, adopted by the group's governing house of delegates, said that until effective treatment and vaccines are developed. "The only available measure for reducing the spread of Aids is behaviour modification, achieved through education of the public."