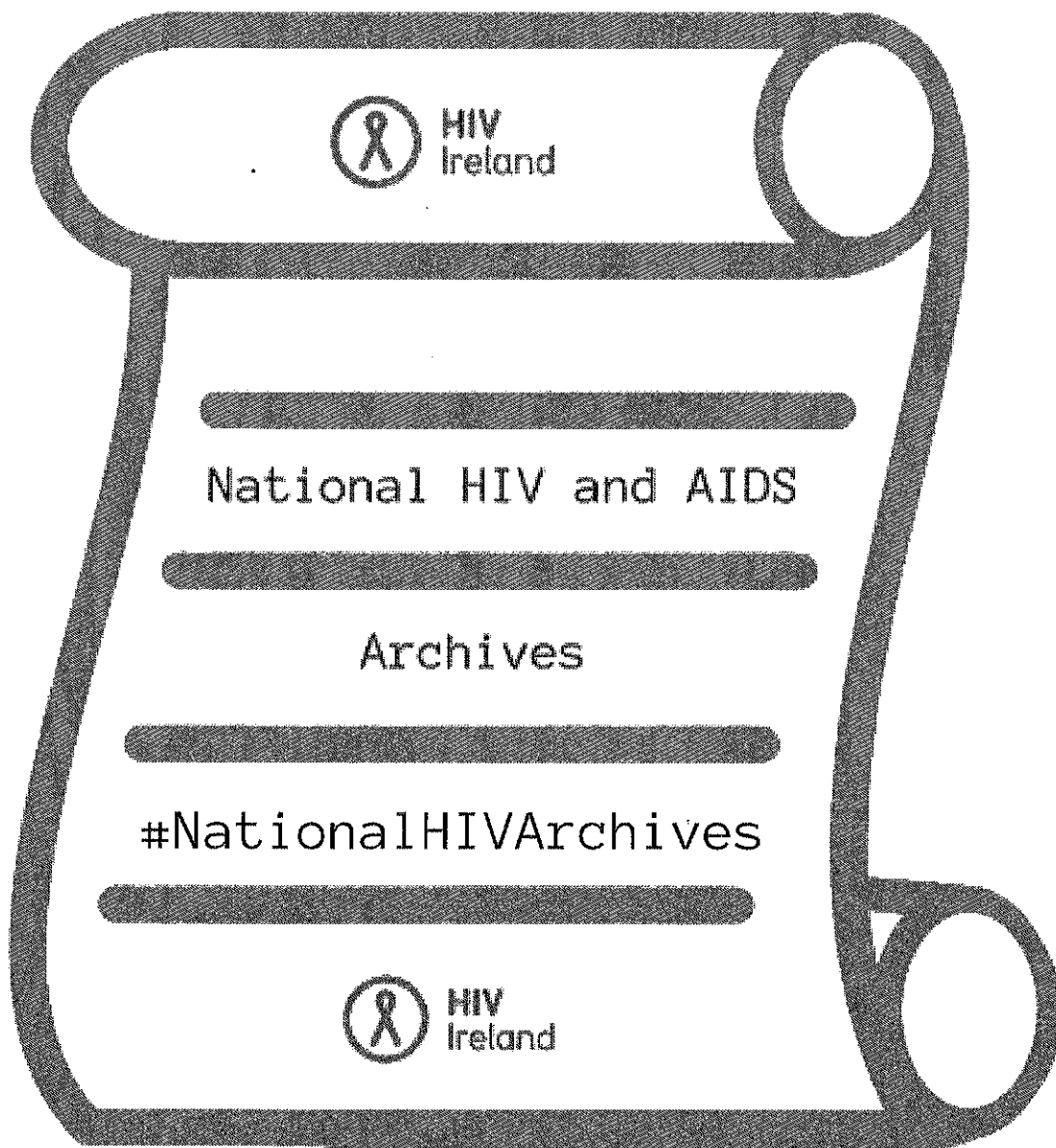


Print Media



16th to 22nd January 1987

Evening Herald
16th January 1987

Acupuncture jabs not AIDS threat

FEARS that acupuncture needles can transmit AIDS are completely unfounded, the President of the Irish Acupuncture Association said last night.

Mr. Ronnie Turner said that some patients had raised queries about AIDS and acupuncture. He pointed out that disposable needles are used in the case of treatment for smoking or dieting.

And the Association has now decided to use disposable sterile needles for all treatment. He stressed that patients who had received acupuncture treatment in the past few years had no reason to worry.

All needles used are sterilised and there is absolutely no possibility of transmission because the AIDS virus cannot survive outside the human body.

PEPTIDE T IN TREATMENT OF AIDS

SIR,—We have treated near-terminal AIDS in four men (aged 31, 33, 39, and 44 years) on a compassionate basis with the octapeptide Ala-Ser-Thr-Thr-Thr-Asn-Tyr-Thr (peptide T), a segment of the envelope glycoprotein (gp120) of human immunodeficiency virus (HIV). Peptide T inhibits HIV in vitro and blocks the binding of the viral envelope to the CD4 receptor.¹

Peptide T was given by intravenous infusion at a dose of 1 mg twice daily for one week followed by 2 mg twice daily for the next three weeks. During the treatment period the patients have been clinically assessed, HIV cultures have been done on blood and cerebrospinal fluid, and lymphocyte indices have been scored and compared with findings before treatment.

Lymphocyte counts improved during the treatment period. In the first patient, on whom the tests have been completed, lymphocytes increased sixfold. Clinically there has been no deterioration during the test period and no loss of body weight in any of the four patients.

Peptide T appears non-toxic, except for a fall in blood pressure on one occasion when the infusion rate was increased (this peptide is homologous with a segment of vasoactive intestinal peptide).² In one case concomitant psoriasis improved during treatment and was in complete remission after four weeks without peptide T.

Central nervous system involvement was monitored using a low field magnetic resonance (MR) imager together with an additional image processor.³ The relaxation times T1 and T2 were estimated from ventricular transverse axial sections. The measurements were made from the whole brain in the selected section excluding the ventricular system. Before peptide T was administered both T1 and T2 were significantly greater (245 [36] and 98 [12] ms, respectively; mean [SD], n=4), than values in apparently healthy controls (T1=186 [20], T2=81 [10]; n=32). In two patients so far evaluated a lowering in T1 (16%) and T2 (18%) towards normal values was detected after four weeks of treatment with peptide T.

This study justifies further investigation of peptide T and related analogues in patients with HIV infection and AIDS. Clinical testing of peptide T in AIDS patients, after ethical review procedures, is now under development.

By mimicking the action of peptides, viral proteins could exert hormonal effects throughout the body, including the central nervous system, and thus may have a role in the aetiology of the progressive dementia of AIDS patients. Characterisation of the biological properties of peptide T and its analogues could facilitate efforts to control the AIDS epidemic. This line of research may also provide insight into the alleged viral cause of schizophrenia. Studies to test the action of peptide T and the hypothesis of viral involvement in schizophrenia are also under way.

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DIAGNOSTIC TESTS

① The Lancet,
JANUARY 17
1987

DIAGNOSTIC SIGNIFICANCE OF QUANTITATIVE DETERMINATION OF HIV ANTIBODY SPECIFIC FOR ENVELOPE AND CORE PROTEINS

SIR,—Almost all sera that are positive in screening tests for antibody to human immunodeficiency virus (HIV) contain antibody to proteins encoded by the envelope gene.¹⁻³ The *env* gene encodes for a precursor protein of about 160 kD which is cleaved to the two glycoproteins gp120 and gp41. Antibody to the *gag* gene encoded protein p24 was detected in less than half of patients with AIDS.² The *gag* gene encodes for the precursor protein p55, which is processed to the core proteins p24, p17, and p15.

We have studied antibodies to envelope and core proteins quantitatively in healthy people and in patients who were positive for anti-HIV. We used the Abbott confirmatory enzyme immunoassay in which viral proteins produced by the recombinant DNA

MEDIAN (AND RANGE) TITRES OF ANTI-HIV AND ANTI-CORE IN DIFFERENT STAGES OF HIV INFECTION

Group	No	Anti-env	Anti-core
Healthy			
Drug addicts	13	2700 (500-3800)	35 (2-7000)
Haemophiliacs	13	2200 (220-6000)	45 (neg [2]*-4800)
Blood transfusion recipients	4	990 (60-4000)	44 (4-80)
Patients			
ARC	16	1025 (5-2200)	2 (neg [6]-1400)
AIDS	9	950 (75-3200)	Neg (neg [6]-25)

*Number of patients without antibody.

technique are bound to the solid phase. The protein of the anti-env test contains all the aminoacids of gp41 and part of the aminoacids of gp120. The protein of the anti-core test contains all aminoacids of p24, and part of the aminoacids of p17 and p15. Antibody titres were measured using a reference dilution curve for a pool of twenty anti-HIV positive sera.

Median titres of anti-env were much higher than median titres of anti-core in all groups tested (table). In patients with AIDS or AIDS-related complex (ARC) median anti-env titres were similar to or only slightly lower than those in healthy anti-HIV positive persons (drug addicts, haemophiliacs, and transfused individuals). All those tested were anti-env positive, so screening and confirmatory tests for anti-HIV should focus on this antibody.

There was a strong association between clinical disease and a low median anti-core titre. 6 out of 9 patients with AIDS and 6 out of 16 patients with AIDS-related syndromes had no detectable anti-core, whereas anti-core was detected in all but 2 of the 30 healthy people.

Anti-core titres may fall because of absorption by large amounts of core proteins liberated from infected cells after cell destruction. Serial monitoring of sera from infected people for a decline in anti-core titre might be a marker for major cell destruction and an early warning of development of disease in healthy anti-HIV positive individuals. Anti-core titres probably fall before the T4 lymphocyte count drops significantly, because destruction of these cells may for a while be compensated by the immune system. In patients with AIDS-related syndromes the median titre of anti-core was one-twentieth that found in healthy infected individuals, and more than one-third of patients had no core antibody at all.

2 of 13 healthy haemophiliacs also had no anti-core in the presence of high titre anti-env (3400, 2400). In the past, a high percentage of haemophiliacs were exposed to HIV in pooled clotting factor concentrates. All twenty-four plasma pools sent between June, 1984, and August, 1985 from the USA to Germany were positive for anti-HIV by screening tests⁴ and in 15 of the 18 pools tested the positive result was confirmed by western blot. However, in some clotting factor concentrates produced from such pools HIV may be inactivated by procedures used for inactivation of hepatitis B virus (heat inactivation, ultraviolet/β-propiolactone treatment). Therefore, in seropositive haemophiliacs a lack of anti-core may indicate contact with non-infectious HIV envelope protein present in pooled clotting factor concentrates, not true infection. A negative anti-core result could give hope to haemophiliacs and blood recipients with recent seroconversion in anti-HIV screening tests.

Quantitative testing for anti-core antibody seems to be important for diagnosis and prognosis in HIV infection. Cohort studies are needed to confirm our suggestions.

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AIDS CLEANS UP VICE STREETS

By DAVE MULLINS

AIDS has cleaned up Dublin's vice operations.

Gardaí insiders confirmed last night that the vice trade has taken a hammering over the past year.

Said one source: "There's very little doing at the moment. Everyone's running scared of AIDS and it's making our job a lot easier."

He added: "Up until very recently, our biggest concern was homosexual activities between men and boys."

"There was growing evidence that child prostitution was on the increase and was being organised by just one or two people."

"But lately we've had very few complaints and even less evidence of illegal homosexual practices and it's all because of the AIDS threat."

Many of the women who used to frequent the "pick up" areas around Fitzwilliam Square and Lower Mount Street are no longer on the beat.

Drop-off

Local residents in these areas have noticed a big drop-off in the number of girls soliciting — and the number of clients on the prowl.

One vice girl who used to commute from England to work the Fitzwilliam Square area told SUNDAY WORLD: "It just isn't worth

it any more. The guys are too afraid of catching AIDS."

"I know quite a few girls who have given up the business too — the AIDS threat is just too serious. Who wants to die a painful, lingering death?"

Contact

• Persons who have been in contact with the AIDS virus will shortly be able to get out-patient treatment at a new clinic in St. James's Hospital, Dublin.



• There's not a lot going these days for the odd few hookers for business in Dublin's Fitzwilliam Square.

Evening Press
19th January 1987

AIDS MOVE BAFFLEMENT

Just a brief note to register my bafflement at the current discussion over a major AIDS awareness campaign, certainly a response is required but it's the scale and content of the response envisaged that is intriguing.

I must confess I cannot appreciate why some people think that vast resources should be spent on such a campaign when I believe it can safely be said that not even in the most remote reaches of the island could a person even hope to avoid being aware of AIDS, of hearing of its history, its effects, what it's about, how it's

obtained, how it's not obtained, what it does, what it doesn't do, and if such is the case, of the risk the person runs and how they might stop running it.

Yet now the Government proposes that we be lavishly treated to yet more on a subject that has already been lavishly and sufficiently dealt with for free.

Does the Government mean to tell us that we are all so suitably aware of an informed about all manner of important disease and affliction, their prevention, treatment and otherwise, that there's nothing else of importance in the whole spectrum of public health worthy of vast funding other than the proportionately less significant AIDS virus?

Is it too much to hope that the Department of Health is above vain, unwarranted and extravagant responses to media hype and sectional and personal interests? Could it be that the Department is in fact making an opportunity out of the AIDS virus to force its set of values on the unsuspecting?

CIARAN MacGUILL,
Ascal na Fadchoille,
Cuar Bhothar Theas,
An Cuan Aolbhinn,
Baile Atha Cliath 8.

SL

AIDS campaign

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Yet now the Government proposes that we be lavishly treated to yet more on a subject that has already been lavishly and sufficiently dealt with for free.

Does the Government mean to tell us that there's no other disease or condition deserving of such amounts of public awareness, not to mention such generous outpourings of taxpayers' money? That we are all so suitably aware of and informed about all manner of important diseases an affliction, their prevention, treatment and otherwise, that there's nothing else of importance in the whole spectrum of public health and worthy of vast funding other than the proportionately less significant AIDS virus?

CIARAN MAC GUILL

Ascal na Fadohaille,
Cuar Bothar Theas,
An Cuan Aoibhinn,
Baile Atha Cliath 8.

The
People column
with Brenda Power



Condoms-for-all an Irish joke

BREAKFAST in Number 10 Downing Street must have been the scene of a most uncharacteristic kerfuffle of a morning quite recently.

Early each AM, the PM is furnished with a succinct press briefing prepared by her aides. The idea is to bring her right up to date with salient developments in international affairs, while sparing her the task of wading through pics of Dirty Den's old paramours and daring Di's new hairstyles to unearth the news from the British papers. This briefing—which is also distributed to staff and reporters around Number 10—she digests along with her morning grapefruit.

Well, the old stiff upper lip must have sagged into the toast and marmalade when Mrs. Thatcher cast an eye over the news sheet earlier this month. Among the items on the list was the one-line announcement that the "Government of Ireland was to make condoms available, free of charge, to all citizens in a bid to combat Aids."

Just like that. No protracted arguments. No referenda. Nothing. A fait accompli. Mrs. T. must surely have stared her fried egg in the eye and pondered on what a dark horse old Garret was all along. She must have decided that a man like this



Mrs Thatcher . . . Shocking news.

ought to be handled with far greater respect from now on. She may even have got as far as reviewing her health budget in order to do the same in Britain. Or she could have still been sitting, eyeballing her "sunny-side-up" when an adviser rushed in with a bottle of Tipp-Ex and made a little change to the press briefing. Substituting a "C" for an "R."

Because, you see, it was the far more liberal Iceland which has distributed the free condoms. Not us. It was a mistake. A misprint. Now would the moral majority put away their High Court writs . . . ?

London Times
19th January 1987

Fowler planning Aids hospices

From Thomson Prentice
Science Correspondent
San Francisco

Plans for a national network of hospices to care for dying Aids patients are being considered by Government ministers.

Today Mr Norman Fowler, Secretary of State for Social Services, will visit a new Aids hospice and discuss with city health officials and social workers how such a system could best be operated.

The hospice visit is one of the main reasons for Mr

Spectrum 10

Fowler's week-long trip to the United States during which he will also meet leading Aids specialists in Washington and New York.

A hospice system in Britain is being considered because ministers have been advised that an explosion of Aids cases, expected in the coming year, will place huge physical and financial pressures on NHS hospitals.

Such a system could mean large savings in hospital budgets and would also be preferable to many patients and their families, ministers believe.

One possible version of the system would involve terminally-ill patients being cared for in their own homes with the help of visiting nurses and specially trained home helps.

Doctors in San Francisco believe that such a system here is the only way to cope with the city's epidemic. There were 2,760 cases including 1,608 deaths by the end of last year, and about 70,000 people are believed to be infected.

Mr Fowler has said he will soon call a conference in London of experts and interested parties in the hospice movement to discuss "the provision of care for Aids sufferers outside hospital." He said he expected the churches to play an important role.

He will report to the conference his impressions of the "coming home" hospice, a former convent, in the Castro district of San Francisco, which will accept its first residents in the next few weeks.

It will care for up to 15 Aids sufferers at a time with a small staff led by a senior nurse.

Continued on page 16, col 5

Sw

AIDS unit for hospital

BRITAIN'S first purpose-built ward for AIDS patients opens today at the Middlesex Hospital in London.

The £350,000 unit will accommodate 12 patients now being treated in other wards for a variety of illnesses caused by the virus.

It is unlike traditional hospital infectious diseases units which place great emphasis on isolation of patients in single cubicles to prevent the spread of infection.

Eight of the 12 beds are in the same

room — reflecting the fact that AIDS cannot be spread through normal social contact.

The ward will be officially opened by the Princess of Wales on April 9. News of the royal visit has delighted doctors who say it will help to demystify and destigmatise the disease.

Health Secretary Norman Fowler will meet AIDS victims during a fact-finding tour of San Francisco, the world's gay capital.

His week-long visit will bring him

into contact with homosexuals and drug users as well as medical experts and organisations seeking to cure and comfort sufferers.

Mr Fowler, who flew from Heathrow yesterday, will visit San Francisco, Washington and New York before he returns home on Sunday.

He will be shown a wide range of clinical and educational services being offered to homosexuals and drug users in the United States. The health chief will also visit a hospice which cares for people dying from the disease

SPECTRUM

The dying pains of freedom



The Aids epidemic in the United States is the biggest in the Western world, dwarfing the crisis in Britain. This week Norman Fowler, Social Services Secretary (left),

is in America to learn how the battle against the disease is being waged. His mission starts today in San Francisco, the "gay capital of the world", from where Thomson Prentice begins a two-part series on a frightened nation

Time has almost run out for Jack Townsend. In the last three years, 15 of his friends have died from Aids and he, too, is doomed. For him, as for huge numbers of others, the gay American dream has become a nightmare.

Only five years ago, San Francisco celebrated its title of gay capital of the world. Today the party is over and its sunlit streets and uninhibited ways are overshadowed by a devastating epidemic that so far has taken more than 1,600 young lives and will inevitably claim many thousands more.

By last week there had been about 2,820 cases of Aids in a city whose population is 685,000. The incidence of the disease here is the highest in the United States. Only New York, with a population more than 10 times as big, has had more cases.

More than half of San Francisco's homosexual population of around 100,000 are believed to be carrying the Aids virus. At least half of them may perish as a result. The most conservative medical estimate is

'Crazy days are over. We've learnt the hard way'

that 15,000 will contract the disease and die within the next five years. Health Department officials expect to treat 15,000 with Aids

warnings like those now seen on bill-boards in British streets.

The campaign has always been targeted mainly at the gay population. The current campaign for the general public is aimed at dispelling myths. "Some people think you can catch Aids from a glass; you can't," says one poster. "Fight the fear with the facts," says another. Doctors have resisted moves to introduce an exchange system for drug addicts' needles. Instead, newspaper and poster adverts show addicts how to sterilize their needles with bleach. Most San Franciscans believe the authorities have provided the best possible resources but individuals still believe that the disease is confined almost totally to homosexuals and do not believe that they themselves are at risk.

How San Francisco is coping with this human tragedy and what can be learnt from it are questions that have brought Norman Fowler and a team of advisers to the city today. The answers that he takes home may profoundly affect the way Britain faces up to the epidemic on its own doorstep.

Aids is not only a disease of homosexuals. As the government education campaign strives to emphasize, every one is at risk. Growing numbers of heterosexual men, women and their babies are now developing the symptoms.

But in San Francisco the disease has taken its heaviest toll by far among the gay community. As Mr Fowler will quickly discover here, it is that community, helped by



City's fight for survival: San Francisco's gays demonstrate for more financial support to combat the devastating effect of the Aids epidemic

middle class, they have settled into the surrounding streets of gentrified 19th-century houses and apartment blocks, opening gay estate agencies, gay legal firms, gay bars, cafés and clubs. They publish and buy gay newspapers, attend gay churches and elect gay politicians. There is a society with its own rules run for itself by itself.

But today the Castro district is no longer the place where anything goes. Rather, it is where anything went. The notorious bath-houses have been closed because of the promiscuity they encouraged. Many gay sex clubs have also gone and although gay contact magazines are still crowded with lurid personal ads, many of them are now for men seeking "healthy safe sex" partners.

The Aids epidemic has changed everything probably for ever and another revolution is now under way. "The crazy days are over," says Jack Townsend. "We have learnt the hard way that a sexual free-for-all is a killer. By changing our behaviour, by learning how to protect ourselves, we have slowed down the spread of this disease and reduced the risks for everyone, not just the gay population."

"We have discovered that we have a crucial part to play in fighting Aids. That discovery has not saved my life but it has changed it. It's too late for me but there is still time to help others."

Jack Townsend is part of a unique network that has made San Francisco a model for Aids advice, education and prevention. The



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Jack Townsend

I wasn't going any further in life, that this was all there would be to it. For the next year I hid from the world. I changed my address, took the phone out, and isolated myself. It was a kind of suicide. You know you're dying, so you start to behave as if you'd already gone."

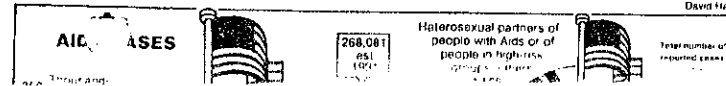
The Aids foundation couldn't save Jack's life but it has given it some meaning again. "It has given me a sense of self-worth. They have turned me from being a quitter to being a fighter and I'm going to fight until I die."

"I don't see myself as a very strong person but if I can go through all that I have, physically and emotionally, and still bounce back, then anyone can. So I try to help other people, try to get them out of their sick-bed and into the sunlight. I take calls on a hotline from gays and straight people, men and women, who are all very anxious and I pass on the advice and information that has been developed here. Aids is a truly terrible disease but people who have it aren't ogres. We need to give and take love like anyone else. Whatever time I've got left I want to use telling people how to protect themselves."

Dr George Rutherford, medical director of the Aids office at the San Francisco Department of Health says: "There is no doubt that the disease has a dramatic

THE GRIM FACTS

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planting season and pitifully

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that 15,000 will contract the disease and die within the next few years. Health Department officials expect to treat 25,000 with Aids-related conditions in the coming year.

Every day there are at least two more deaths and three new cases. Doctors are bracing themselves for a second wave of the epidemic. With the active participation of Mayor Dianne Feinstein, San Francisco health and social services departments have in recent years launched a series of policies and programmes to provide comprehensive care and Aids education in the city.

The current publicity campaign is limited to newspapers, plus posters and leaflets in health centres, public offices and doctors' waiting rooms. There are no TV commercials — the cost is seen as too high and local stations have broadcast public service announcements — and no huge

warnings like those now seen on bill-boards in British streets.

The campaign has always been targeted mainly at the gay population. The current campaign for the general public is aimed at dispelling myths. "Some people think you can catch Aids from a glass; you can't," says one poster. "Fight the fear with the facts," says another. Doctors have resisted moves to introduce an exchange system for drug addicts' needles. Instead, newspaper and poster adverts show addicts how to sterilize their needles with bleach. Most San Franciscans believe the authorities have provided the best possible resources but individuals still believe that the disease is confined almost totally to homosexuals and do not believe that they themselves are at risk.

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But in San Francisco the disease has taken its heaviest toll by far among the gay community. As Mr Fowler will quickly discover here, it is that community, helped by huge medical and educational resources, which can offer the best examples of how Aids can be fought and perhaps controlled.

Jack Townsend is such an example. He is a typical product of Castro, the city's almost exclusively gay district. It is where the gay revolution began in the early 1970s, changing the lives and attitudes of millions around the world. Its centre is Castro Street, an extraordinary boulevard where there have been no taboos and where the eccentric, the outlandish, the outrageous and the bizarre have been not merely accepted but celebrated for more than a decade.

Here, gays from all over the United States and many European cities have migrated to find the freedoms denied them elsewhere. Predominantly young, white and



City's fight for survival: San Francisco's gays demonstrate for more financial support to combat the devastating effect of the Aids epidemic

middle class, they have settled into the surrounding streets of gentrified 19th-century houses and apartment blocks, opening gay estate agencies, gay legal firms, gay bars, cafes and clubs. They publish and buy gay newspapers, attend gay churches and elect gay politicians. There is a society with its own rules run for itself by itself.

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Jack Townsend is part of a unique network that has made San Francisco a model for Aids advice, education and prevention. The

city is making formidable strides towards checking the epidemic. Jack is a volunteer worker at the city's Aids Foundation, one of many well-organized and publicly-funded groups which provide free counselling.

The foundation, which Norman Fowler will visit tomorrow, operates from the fourth floor of an old office building in a dog-eared area of the city. Amid frenetic activity it produces vast amounts of leaflets, brochures, posters and educational videos aimed at every section of the population, as well as for Aids sufferers, their friends and families. Many of its volunteers are self-styled PWAs — People With Aids.

Jack Townsend, 40, is a well-educated, talented businessman

who was told he had Aids two years ago. He has been in hospital more often than he can remember. His body is wasted by the disease, his clothes hang loose from his thin shoulders. He doesn't have much longer and it shows, and he knows it.

"I had been sick for a year, losing an awful lot of weight, before the doctors told me I had Aids. It was no big surprise by then. I had had one faithful relationship for 13 years and then he died from a heart attack. I went loose and fooled around in the Castro for a year and got infected. The diagnosis was like finding myself up against the Berlin Wall. You think you're immortal, then somebody tells you you're not."

"I couldn't get over the fact that

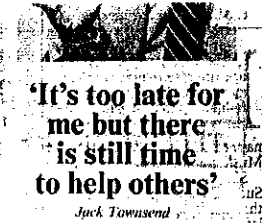
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"I don't see myself as a very strong person but if I can go through all that I have, physically and emotionally, and still bounce back, then anyone can. So I try to help other people, try to get them out of their sick-bed and into the sunlight. I take calls on a hotline from gays and straight people, men and women, who are all very anxious and I pass on the advice and information that has been developed here. Aids is a truly terrible disease but people who have it aren't ogres. We need to give and take love like anyone else. Whatever time I've got left I want to use telling people how to protect themselves."

Dr George Rutherford, medical director of the Aids office at the San Francisco Department of Health, says: "There is no doubt that most gays here have dramatically modified their sexual behaviour and reduced the spread of Aids. They have fewer sexual partners and have adopted safer sex practices. As a community they have responded very well to public education. If we could get a similar response from the rest of the population we could be really making an impact on this epidemic."

"But that's going to be very difficult. Most people still don't believe Aids is their problem. Unfortunately, they're wrong."



Jack Townsend

'It's too late for me but there is still time to help others'

Jack Townsend

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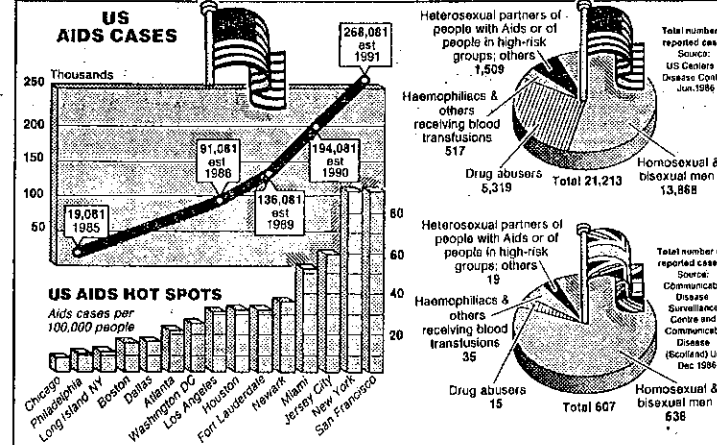
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TOMORROW.
Survival pack:
What answers will
Norman Fowler bring
back from Bay City?

THE GRIM FACTS

More than 1.5 million people in the United States are infected with the Aids virus, according to official estimates, and by the beginning of this year 29,000 Americans had contracted the disease. Of those, 15,757 had died. The figures dwarf the epidemic in Britain where 610 cases, including 293 deaths, had been reported by December 31. Up to 100,000 others may be carrying the Aids virus. It is predicted that by 1991, at least 270,000 people will have caught Aids in America, with 179,000 deaths. By then, heterosexual cases will have increased ten-fold to 23,000 with babies born with the disease. New York is America's worst hit city, with 8,681 cases since 1981, 4,914 of whom have died. San Francisco reported 2,760 cases, including 1,608 deaths by the end of 1986. The disease is now the third most common cause of death in the city after heart disease and cancer.



PERSONAL BANKING

Now you can spread the cost of your regular bills

When Britain went down with a cold

Forty years ago this week the country succumbed to a cold



much of the day and stopped the Third Programme altogether. The shortage of newsprint led to the stoppage

of the total of the flocks in Britain. Subsequent rain and floods led to a disastrously late planting season and pitifully

Wellcome Unit's AIDS Drug Shows Promise

By MARILYN CHASE

Staff Reporter of THE WALL STREET JOURNAL

SAN FRANCISCO — Scientists at the U.S. National Institutes of Health reported important preliminary findings that the drug azidothymidine, or AZT, developed by a unit of London's Wellcome Foundation Ltd., may at least temporarily reverse some of the dementia and other neurological disorders associated with acquired immune deficiency syndrome.

Meanwhile, an advisory committee to the U.S. Food and Drug Administration Friday recommended approval of AZT as the first prescription drug to treat AIDS, just 18 months after the first experimental dose was given.

But the manufacturer Burroughs-Wellcome Co., a U.S. unit of London-based Wellcome, cautioned that the drug—to be branded Retrovir—will remain in short supply, tightly-allocated and very expensive.

AZT's use was approved by the advisory panel only for cases of AIDS with pneumocystis carinii pneumonia, and severe AIDS-related complex or ARC, the two categories of patients shown to have enjoyed improved survival in a controlled trial that was ended last September.

The study at the National Institutes of Health, led by Robert Yarchoan and Samuel Broder of the National Cancer Institute, reported that four out of five patients with AIDS-linked neurological dis-

orders improved while taking the antiviral drug.

The authors stressed, however, that the improvements were demonstrated in only a very small group of patients, thus leaving unanswered many questions about how many patients may benefit, and for how long. They added that the findings—which are scheduled for publication this week in the *Lancet*, a British medical journal—called for a larger controlled study of AZT in AIDS patients with the brain and nerve disorders.

In fact, such a study may be undertaken soon, according to Anthony S. Fauci, director of the National Institute of Allergy and Infectious Diseases. Dr. Fauci said he plans a study to test AZT in AIDS dementia at some of the 19 federally sponsored AIDS treatment-evaluation units around the U.S.

Currently, AZT is being considered only as a treatment for AIDS and its related pneumonia. If it were found effective for other AIDS-related conditions, AZT's use would be broadened considerably.

Infection of the brain and central nervous system by the AIDS virus is one of the most devastating manifestations of the syndrome. It can provoke a range of symptoms, from simple memory loss to outright psychosis, and can cause pain, weakness, numbness and paralysis. The authors said patients with AIDS-related dementia have a mean survival time of only 4.2 months.

According to the report, one patient in the study, a 32-year-old designer with AIDS, had deteriorated to the point that he couldn't draw or walk more than short distances because of weakness, uncoordination and loss of memory and concentration.

After 16 weeks on AZT, his muscular and intellectual function improved, enabling him to walk longer distances, concentrate and remember and resume his drawing. Improved function was confirmed through the use of standardized neurological and psychological testing and through a repeat of a brain scan.

This patient, however, like others, became anemic during treatment with AZT and required several blood transfusions during his therapy. As reported, bone marrow suppression, frequently requiring blood transfusions, is AZT's most serious side effect. "AZT has a price," Dr. Broder warned doctors at an immunology seminar in San Francisco last month. "Many patients can't take it or must have it curtailed."

Dr. Broder said he was encouraged because the drug provides the first relief from "the long night of dementia" that imprisons many AIDS patients. "What these findings suggest is that some patients can be released, at least temporarily, from their dementia by anti-retroviral therapy," he said in an interview. "We still don't know how many patients will find such release, and how many will be summoned back."



Anderton: Outspoken

Calls for 'prophet' Anderton to quit

POLICE chief James Anderton was called on to resign yesterday following his statement that he believes he may be a prophet of God.

Councillors in Manchester are to write to the Home Secretary claiming that their outspoken chief constable—already at the centre of controversy over his AIDS speech last month—should no longer run the city's force.

On Radio 4's religious affairs programme on Sunday, 54-year-old Mr Anderton said he used his job as 'an instrument of God's judgment' and claimed: 'If Jesus was here today he may well have spoken in terms similar to the ones I used.'

At a meeting of the city council's police monitoring committee, chairman Tony McCardell said: 'It amazes me that a chief constable of a very large police force could come out with such rubbish. It appears to me that he has gone over the top.'

Evening Herald
20th January 1987

'Frisco AIDS trip

TWO top British officials arrived in San Francisco today on a three-day visit to study ways of treating AIDS, which has killed at least 1,600 people in the American city.

Social Services Secretary Norman Fowler and Sir Donald Acheson, Britain's chief medical officer, will visit hospitals and discuss potential treatment with doctors.

Mr. Fowler has predicted as many as 4,000 Britons will die by the end of the decade from AIDS, which destroys the body's natural defence system.

Among those at high risk from the disease are homosexual men, who form a large community in San Francisco.

Call for wedding AIDS tests

AIDS tests for brides and grooms "would be a prudent precaution" before marriage, an eminent doctor said today.

Professor Alan Browne of the Department of Obstetrics and Gynaecology in the Rotunda Hospital said that people would never get married to someone if they knew their partner had a communicable and terminal disease.

"It is not like cancer or TB. AIDS can be spread to a partner and to babies."

A test before marriage is a pretty good idea, particularly if you live in an area where AIDS is

taking on epidemic proportions."

Prof. Browne is also member of the Church of Ireland's Role of the Church Committee, but said he was not expressing an official church view.

Church of Ireland spokesman John Buttermore said that the Professor was "talking as an informed layman, with a specialist knowledge."

If people getting married could not bring themselves to talk honestly about their past sexual histories, an AIDS test for both partners would be a prudent thing to do, said Prof. Browne.

The taking of the test

need not involve "all that much of a performance," he added. "After all, you've got to take one if you're going to Saudi Arabia, and marriage is much more important."

Church of England clergymen have already suggested the jab-and-tell screenings, with Northampton Archdeacon Basil March saying, "It would be a little like having a car MOT."

Meanwhile, Md. Jim Cantwell of the Catholic Press Office said that such tests would have implications for the freedom of the individual.

It was not something the Church had given at-

tention to, but in his opinion a person would have to be "absolutely perverse" to get married without telling their beloved that they had AIDS.

"Two people who are about to marry in love would have to tell each other any inhibitions to their union, in full openness and frankness."

Dean Victor Griffin of St. Patrick's Cathedral said that the idea of blood tests for couples about to marry raised "very complicated issues." He would have to consider it carefully before venturing an opinion, he said.

The fear

AVRIL, 18, first slept with a boyfriend three years ago. Since then she has had one long term relationship which lasted fourteen months, and many casual boyfriends. She has slept with five different boys in that time.

During 1986 Avril went to her local family planning clinic and was prescribed the pill. She feels, in taking it, she is being responsible, rather than permissive.

She doesn't see anything wrong with sleeping with a boy. Sometimes it's expected though she would never do it unless she too wished.

She is concerned about AIDS and now insists that the boy uses a condom. This, she says, can make for difficulties and embarrassments. Would it not be safer to refrain from sexual activity altogether? Avril shakes her head: "It's not that easy, you're sort of committed".

Not all young people feel the same. Lucy, still a virgin at twenty (despite many male suggestions to change her status) believes the sexually transmitted AIDS virus is a new and credible reason for avoiding casual sex.

"I think that many young people now will decide to be faithful to one person, hopefully the person they will later marry and spend their life with".

Some people say that fear of AIDS is putting old style morality back into fashion. In a poll taken in London recently, 37 per cent of young people surveyed wanted a return to old fashioned chastity and fidelity.

Mind you, the motivation is probably two parts fear to one part ethics.

Gorgeous

Bernard, 22, took a summer job in America this year and had an extremely celebratory stay. "The girls were gorgeous, but you'd be afraid to kiss them, never mind anything else, in case they were AIDS carriers".

His friend David, 21, says that while the streets of Dublin are far less likely to be populated by infected AIDS carriers, fear will have a knock-on effect.

"You'd want to be very stupid to be sleeping around casually these days. I think people are going to be much more careful".

So could it be that the wheel has turned full circle, and that fear will do what authority couldn't — that is shackle the sexual freedom that today's young people had come to expect as their right?

It's a philosophical issue as well as a health and morality question. Right down the ages, youth has sown its wild oats and reaped ex-



perience. Fellas and girls have fallen in and out of love (and lust), had a good time and a miserable time, all in the instinctive search for Mr. / Miss Right.

It was all part of the necessary business of growing up. And while most societies have sought to veto pre-marital sex, it has flourished regardless, if hidden and illicit.

Indeed the parents of today's young people, so often labelled permissive, have had their fling. Avril's parents were not available for comment, as they are blissfully unaware of the full details of their daughter's nocturnal activities.

But they too presumably had their day, though it's not easy to get today's middle-aged parents to talk about their youthful indiscretions.

For some honest recollections I contacted Brian, (at 45, still very dinky), known affectionately and accurately as "The Stud" in parts of Dublin 4, twenty years ago.

"We were mostly in it for the fun" he says now, "but there's no doubt we tried it on, and some girls did and some girls didn't. We were quite philosophical and matter-of-fact about the chatting up. Some nights you struck it rich, others not."

"Looking back I can't remember any thought at all about getting a girl pregnant. We were quite innocent really, though I suppose the better description is irresponsible".

"There was no question of any danger to the fellow. We had fun, without any strings attached. When I think now of any young lad behaving in that way towards my own daughter, I'm quite horrified, particularly with the new danger of AIDS and other sexually transmitted diseases. Times have changed".

Maevie also was prepared to reminisce

**You'd want to be
stupid to sleep
around these days**

which is turning people off sex

A new morality



It's not just nice girls who say 'no' anymore, reports Anne Dempsey

about simpler times. "It sounds terrible, but for a lot of couples it was a case of How Far You Could Go, without going the Whole Way. We never used the phrase heavy petting, but that is what it was."

"I'm going back 25 years, and at that time it's safe to say the majority of couples doing a line did not sleep together. We were virgins getting married, the boys too, though some of the hard men liked to pretend they were very experienced. I think it was all talk."

Liberal

"Getting off with someone, or having a one night stand meant kissing, that's all. Rimming hands were discouraged, though some of my friends may have been more liberal with their favours than I."

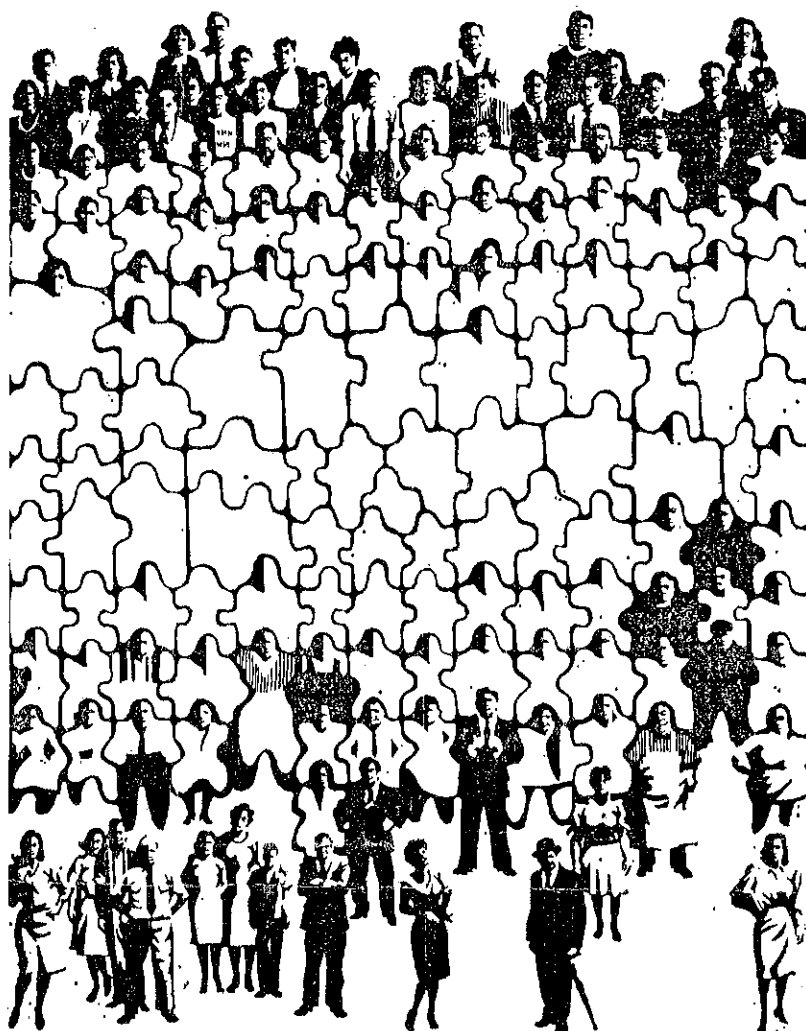
"We didn't seriously consider sleeping with a boy, though it was discussed. There was a fear of pregnancy, but more

fundamental than that, the whole attitude of the times — what you'd learnt at school, the church, parents, from each other — was against it."

"There was a strong sense of right and wrong. A girl was conditioned to have respect for herself, and there was a sense that our bodies were the temples of the Holy Ghost and that we should treat them accordingly."

"In ways I feel sorry for today's young people. Going with someone now often means sleeping with them, and I know from talking to my own daughters that there is often pressure to do so. Now with the advent of AIDS, sleeping around, having a good time, could quite literally be the death of them."

"I'm not condoning pre-marital sex. I'm just saying it's difficult for young people today, and they have to cope with problems and issues that we were never presented with."



Helping young people to be more responsible

THERE is little doubt that young people are sexually active these days in a way their parents never dreamt of.

In 1983 Doctor Mary Short conducted a survey in the Irish Family Planning Association clinics and found that twenty per cent of first time attenders were between the ages of 17-20.

About 15 per cent of these were already sexually active for almost two years before seeking contraceptive advice. More than one-third had already been pregnant.

These statistics indicate that many young people did not know much about their bodies or relationships. The IFPA responded by running courses for professionals working with young people on sex education and personal relationships education.

This led to the recognition that young people need to be involved in their own education. In January 1985, ACTS, Adolescent Confidential Telephone Service was launched. They had 632 calls during 1985, and even then worries about sexually transmitted diseases were the third most common type of call received.

By last autumn this steady trickle of calls had increased to a flood, and the level of calls about AIDS increased sharply.

"Typically young people want to know what is AIDS, how can I stop myself getting AIDS, what do I do if I think I have AIDS," says IFPA's youth officer, Jon O'Brien.

"Our response is to explain what AIDS is, and explain how it can be contracted. There is still a lot of ignorance about the disease, and we have had to ally a lot of untruths."

"For instance, some people think you can get AIDS just by talking to someone, that it can be passed down the office rather like a 'flu virus. Other callers worried that you could get it by sharing a glass in a pub with a person who could be infected. None of this, of course, is true."

Be careful

"When it comes to minimising risk, our overall emphasis is to encourage responsible behaviour. We give them the facts. We say the more people that you have intercourse with the more likely you are to be at risk."

"We say be careful who you sleep with: the greatest risk will come from people you do not know, and that one night stands are extremely dangerous."

"They sometimes respond by saying: 'What if I meet someone really nice and I want to sleep with them?' In that situation if they must, we strongly urge them to use a condom."

Since the service opened, the young counsellors have been dismayed at the high level of young, unprotected sex going on in Ireland.

Many young people have a contradictory attitude to sex — namely it's all right to do it, but not all right to plan to do it, and take precautions accordingly.

"Many young people experience guilt at the thought of using contraception as it implies 'premeditated sex' and they consider it anathema to their religious upbringing and/or romantic beliefs," says John.

"With the AIDS threat, it is particularly important now that people are in possession of the full facts, and if they are going to have intercourse that they protect themselves as fully as possible."

He does not believe that the spread of AIDS will be responded to by an outbreak of puritan Victorian behaviour.

"I think it's important to say that in

our experience the majority of young people are not promiscuous."

"What is true that a serious relationship today is more likely to include intercourse than would have been the case in the past."

"But I don't think AIDS will fundamentally affect young people in the way they act. The fear of pregnancy in the past hasn't stopped people sleeping together, and I think it will be the same with AIDS."

A challenge

"But while I don't feel there will be a return to traditional values, I do hope there will be the beginning of responsible behaviour."

"AIDS is a challenge to young people. We now have to get over the message that it is now more loving and caring to take precautions."

ACTS, the Adolescent Confidential Telephone Service is at the Irish Family Planning Association, 15 Mountjoy Square, Telephone 01 740723, 744133, 729574.

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TUESDAY, JANUARY 20, 1987



(Vol. 36) (4th Week) (No. 17) Price 35p (30p N. Ireland)

AIDS scare may finally stop the soccer kissing

Britain's soccer bosses today warned players to stop kissing each other after scoring goals or risk catching AIDS.

The country's 2,000 professionals received a grim letter from the Football Association alerting them to the dangers of the killer disease.

The warning is backed by F.A. Secretary Ted Croker and medical chief Dr. John O'Hara.

Dr. O'Hara said: "We don't mean to be alarmist, but we

felt we had to do something. We've done our best to stop kissing and cuddling to celebrate goals, without much success.

"Now we aim to frighten players into it," the letter, entitled AIDS and Injuries in Football, is also going to part-timers and amateurs in more than 30,000 clubs.

It warns:

■ Don't drink celebration champagne from the same bottle.

■ Swap the communal bath for showers.

■ Treat open cuts with a sterile dressing and use surgical gloves.

■ If you have to give the kiss-of-life, use a mouthpiece.

■ Don't share strips, toothbrushes or razors.

■ Clean bloodstained clothes or articles immediately.

■ Stay with one sexual partner, use a condom, and don't sleep with prostitutes.

Irish Press
20th January 1987

Campaign on Aids 'explicit'

By CHRIS DOOLEY

DETAILS of an explicit campaign to highlight the dangers of Aids will be presented to Government Ministers at today's Cabinet meeting.

Health Minister, Mr. Desmond confirmed yesterday that the campaign would clearly spell out the dangers of the deadly virus along the lines of the one being run in Britain. "It will be quite explicit, there's no doubt about that", he told the IRISH PRESS.

The campaign, involving a major advertising programme on how to prevent the spread of the disease, will be launched jointly by the Department of Health and the Health Education Bureau before the end of the month.

Mr. Desmond said it would also include a freephone advice service and an additional counselling service. Although it is widely expected that the campaign will advocate the use of condoms, the Minister said he would not be deflected by objections from the Catholic Church. "The campaign will go on," he said.

Asked whether he believed a different government would be as resolute on the issue, Mr. Desmond glibly replied: "A change of Government won't get rid of Aids. It might get rid of me but it won't get rid of Aids"

AIDS

Sir, — In the Babel of voices raised in connection with the AIDS virus, your Medical Correspondent's calm assessment is to be welcomed. Equally welcome is the balanced and caring statement of the Catholic Bishops. Less welcome is the bitter attack on the Catholic Hierarchy expressed in his letter to you (January 15th) from Gerry Roche.

It is clear — and has to be emphasised — that homosexual practices, recourse to prostitutes and drug addiction are the crucial bases of the spread of AIDS. That the innocent, including haemophiliacs, spouses of the bisexual and of drug addicts and even the unborn, should also be at risk is all the more reason to point the finger to where the problems lie: what is not right is the frenzied implication that the whole of society is at risk. Thereafter, it is surely proper to say that chastity outside marriage and fidelity within marriage are, for the vast majority, the first line of defence. It is surely not uncharitable, though it may be idealistic, to suggest that the groups immediately at risk should be helped to change their ways for the better. But there's the rub: we live in a

society where better, if it implies restraint, is an unwelcome concept. The slogan "Play Safe" which has been used in Britain may be thought to imply acceptance of a "Playboy and Playgirl" society where the only norm is a risk to health.

Forty years ago, C. S. Lewis in his brilliant "Screwtape Letters" pointed out that human destruction begins in the mind and in the misuse of language. George Orwell agreed with him and evidence of this Newthink and Newspeak is very relevant in the present context. Thus the hijacking of the word gay to mean homosexual is a sad joke: that many splendid people have homosexual leanings is not the point, rather the attempt to portray homosexuality as a wholly legitimate and normal way of life: it is not, and perhaps the present debate will lead to a clear, but measured and charitable, reassessment of this situation. Intemperate attacks on the bishops is not an answer. — Yours, etc.,

ROGER WHITE.

St Martin's,
Cliffoney,
Co Sligo.

AIDS unit opens in London

BRITAIN'S first purpose-built AIDS ward opened yesterday to treat four male patients. They will be given high doses of drugs to tackle breathing problems and coughs at London's Middlesex Hospital before being sent home in about three weeks.

The £350,000 ward, to be officially opened by the Princess of Wales in April, can take up to 12 patients. They will all be men to begin with, but women may be admitted later.

The hospital said yesterday the ward would have an open visiting policy.

The British Social Services Minister, Mr Norman Fowler, began a visit to San Francisco yesterday to see the kind of facilities set up for AIDS victims there.

Chart topping pop group, The Communards, will join the fight

against AIDS next week when they are to stage a concert at the Barbican Centre in London to raise money for Action Against AIDS.

And British tourists visiting the US were advised not to have sex there by Dr Michael Waugh, of Leeds General Infirmary, yesterday. Anyone who did have sex in the US should seek expert advice from their local sexually-transmitted diseases clinic when they returned, he said.

A vaccine against AIDS is unlikely to be available for five years or more, although tests on experimental substances are expected to go ahead this year, two US experts said in Geneva yesterday. They told the World Health Organisation it could conceivably be "much longer" before a vaccine would be found. —(PA)



Moral spokesman: Mr Anderton's outspoken stance on Aids produced a demand for his immediate resignation yesterday.

Call for Anderton to resign

By Ian Smith
and Peter Evans

A psychiatrist may be asked to examine Mr James Anderton, Chief Constable of Greater Manchester, after a weekend interview in which he suggested he might be a prophet chosen by God to speak out on moral issues.

Members of Manchester City Council Police Monitoring Committee agreed unanimously at a 90-minute

meeting yesterday that they want Mr Anderton to resign as leader of England's largest provincial police force immediately.

The chairman, Mr Anthony McCardell, is to investigate what powers the committee or the Greater Manchester Police Authority, of which he is Labour group leader, have to force Mr Anderton to undergo a psychiatric examination.

"I have heard excerpts of Mr Anderton's latest sermon from the mount and it amazes me the Chief Constable of a very large and important police force could come out with such rubbish," he said.

"If he was the chief executive of a council or a chief executive of a firm I have no doubt we would be advising him to seek medical help. It appears to me he has gone right over the top this time."

"One must begin to question the sanity of a senior police officer who seems to believe he is a prophet."

Pointing out that Greater Manchester has the biggest crime rate and lowest detection rate, Mr McCardell said: "If Mr Anderton really is God's messenger then he

Continued on page 18, col 3

COPS AND PROPHETS

In terms of strict logic and pure theology there is little to fault many of the prolific pronouncements of Chief Constable Anderton about the connection between policing and private morality. It was singularly uncharitable of him to speak of those at risk from AIDS "swirling around in a human cesspit of their own making". It was, indeed, not strictly accurate: there are some wholly innocent victims of AIDS (people who have caught it from blood transfusions or from legitimate liaisons with infected partners).

As far as homosexuals go, those who may be judged to have been born in that condition are faced with a dire choice between complete continence (a notoriously difficult condition to achieve) and what Christians regard as serious sin. That is a dilemma with which even a Christian policeman should show a measure of sympathy.

The note strongly struck by the Chief Constable's more recent pronouncements, however, does raise greater difficulties. Comparing himself (some would say not unfavourably) with John the Baptist and even Jesus Christ, he has announced himself to be an instrument of divine providence.

Now, intrinsically, there is nothing absolutely wrong about that. Are we not, on a Christian view, all instruments of divine providence? Did not Saint Paul remind the rulers of earthly kingdoms, with strong

insistence, that they held their commissions from on high?

Well, there is a question of taste involved. It is one thing to be a lieutenant of the Lord and quite another to keep on saying you are. As the great Bishop Butler reminded Mr Wesley, the pretension to direct divine inspiration is a very "horrid" thing. It is also a very unconstructive thing in that it provokes many ordinary mortals to scepticism and even derision.

It is not, however, purely a matter of taste. Even in terms of the theology which he so much loves, the Chief Constable should observe the distinction between the two swords, the spiritual and the temporal — the first wielded by the Church and directed to the salvation of souls, and the second directed towards maintaining the general fabric of society, to putting down crime and upholding the rule of law.

Both have a religious significance, but they should never be confused with each other. This is so even in homogeneous Christian societies. It is vastly truer in the pluralist society in which we live. Mr Anderton should recognise that we are afflicted by profound divisions not only about private morality but also about public policy.

There are those who think that the social consequences of unemployment and the alleged iniquities of the City are a greater threat to Christian civilisation than sexual

promiscuity or even violent crime. This view is profoundly misguided, but it is widely held.

A Chief Constable who leaps into these controversies, appoints himself as Leader of the "moral majority" and starts laying about him in all directions concerned with sexual permissiveness and social indiscipline will be regarded, however unjustly, as a partisan. What people expect of him is a cold, just, impartial administration of the law.

On his knees at night, he may well reflect that in performing this service (somewhat less dramatic than that performed by John the Baptist) he is serving God; so he is; but the public declaration of the fact does not enhance his authority. As a Christian he is commanded to be as wise as a serpent and as gentle as a dove, not, to allude to the famous remark of Samuel Butler, the other way round.

It is certainly the business of the state (on this Mr Anderton is right) to promote what is good and discourage what is evil in society; but the task must be conducted delicately and with a proper regard to whatever may be the current state of public opinion. It is always dangerous for those (be they judges or policemen) who are concerned with the administration of the law as it is to animadvert in general terms about what it should be. A period of silent contemplation from Mr Anderton (not his dismissal) would now be welcome.

Facing up to certain death

Photographs by Rob Weir

As Social Services Secretary Norman Fowler continues his fact-finding mission to Aids-ravaged San Francisco, in his battle to control the killer disease in Britain, Thomson Prentice reports from one of the first hospices for helpless victims

The rooms in the former convent are small, quiet and bare with space for not much more than a single bed and a chair by the window. As Norman Fowler gazed into them yesterday his questions were in his mind. What must it be like to come here to die, and how many places like this would soon be needed in Britain?

The Coming Home hospice for terminally ill Aids patients is the first of its kind in San Francisco and was the first stop yesterday for the Social Services Secretary on the opening day of his fact-finding mission to America.

The hospice, a square two-storey building in the Castro district of the city, will take in its first residents in the next few weeks because the public hospitals can no longer cope.

What Mr Fowler is finding here is a city which, despite huge efforts, is struggling to control a fearsome epidemic. The clear message is that however much Britain is already doing it is unlikely to be enough.

Mr Fowler is being greeted by health officials, doctors, nurses and volunteer workers who are almost exhausted physically and mentally by the stresses of six years of rapidly-mounting casualties among their fellow citizens. Sooner or later, he suspects, British cities may be confronted by a similar crisis.

San Francisco is at least three years ahead of the UK in its harrowing experience of Aids and has many lessons to offer. There have been just over 600 British cases so far, but San Francisco passed that number in 1984 and now has almost five times as many. More than 1,600 have already died. The thousand or so who remain will need skilled and constant care for the rest of their lives.

"Our problems today are yours tomorrow," says Dr David Werdegard, San Francisco's director of health. "The people who are dying now became infected six or seven years ago without knowing it."

"We believe another 70,000 people are infected and that half, perhaps more, will develop Aids in the coming years. The figures in Britain will be different but the pattern will be much the same."

That's why it is so important to plan a long way ahead because there is nothing any of us can do to stop it."

Dr Werdegard expects to have twice as many cases within two years as he has now and twice that number by 1990. By then about half the sufferers will have died but there will be about 4,000 desperately ill people with Aids - four times as many as now - in need of expert care.

Top US health officials predict 270,000 American cases by 1991 compared with 29,000 now and calculate that by then 20 per cent of all public hospital beds will be occupied by Aids patients. The cost per patient from diagnosis to death is expected to be at least £20,000.

The cost of funding Aids projects in the city has soared from about

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'We expect two deaths a week and intend to provide compassionate and skilled care for people making the journey between life and death'

Bill Haskell of the Coming Home hospice

£120,000 in 1982 to over £10 million this year, almost double last year's figure. In addition, there have been millions of dollars spent on research by the University of California at San Francisco, and the state government spent more than £15 million last year to combat the disease, a large portion of that going to the city.

But San Francisco's Mayor, Dianne Feinstein, who leads the city's Aids task force of experts, is calling for much more. She will pursue her demands in Washington this week when she attends the National Convention of Mayors. Such dark visions of the near future are almost too awful to contemplate, but Norman Fowler knows they must be faced. The crucial question is: how best to prepare?

Much of the answer may lie in how San Francisco is fighting the Aids battle. The worst affected American city after New York, it has led the way in challenging many of the problems and has become a model for the rest of the United States.

It has built and is constantly expanding a unique network of medical, social and educational projects to tackle the crisis. Aspects of each strand are being studied by Mr Fowler and his travelling team of advisers, including Sir Donald Acheson, the government's chief medical officer.

The network embraces hospital intensive care and out-patient clinics for sufferers, home nursing services, and a huge public education campaign, expert counselling services for those who may be infected, and Aids classes in city schools. It relies heavily on the voluntary efforts and co-operation of the city's huge gay population and is striving to win support from all ethnic minority groups.

The hospice programme extends beyond the walls of the Coming Home unit. Teams of trained volunteers, nurses and social workers provide care in the homes of dozens of dying victims or in accommodation acquired for them. The whole project is aimed at lifting the

enormous pressures from hospitals such as San Francisco General.

This, the city's showcase, has treated many hundreds of Aids in-patients and handled thousands of out-patient appointments, running eight such clinics a week. Last April it opened a new 20-bed unit. Ward 5A, which Mr Fowler will visit today, is a daunting prospect for any visitor. The potted plants, sprays of flowers and muted pop-music cannot disguise the fact that behind each blue-painted door of the 20 rooms someone lies dying. All the staff here are volunteers.

"You have to want to work here,"

says Roberta Wilson from the oncology department. "It is a battlefield. Each day means getting back to the front line and fighting for these people."

Dr Paul Volberding, the hospital's leading Aids specialist, has the looks of a young Marlon Brando. But his face has grown weary from facing the daily pressures.

"I've just come back from the out-patient clinic," he says in a sombre voice. "I've never seen so many people waiting for attention. It is dawning on me that the epidemic is going to be much worse than I expected. It is going to push our

resources to the limit and something fairly dramatic needs to be done to enable us to cope."

He believes the hospice project is essential. "First, there aren't enough physicians, nurses or beds at our hospitals. Second, the treatment we can give is limited. Third, a hospital ward is not necessarily the best place for a dying Aids patient. There is only so much to be cared for by those closest to him, at home if possible, or at least within the community."

The Coming Home hospice has room for only 15 residents who typically will be men in their mid-30s whom the disease has turned frail and prematurely old. In a sad paradox, over £20,000 of the donations raised to fund the hospice came from bingo games organized by local senior citizens.

The average length of stay in the hospice before death has been worked out, with clinical detachment, at 45 days. The cost of dying is £85 a day per resident, met by public grants, private funds and the medical insurance of the individual.

"We expect two deaths a week," says Bill Haskell, assistant director of the project. "We intend to provide skilled, compassionate care for people making the journey between life and death."

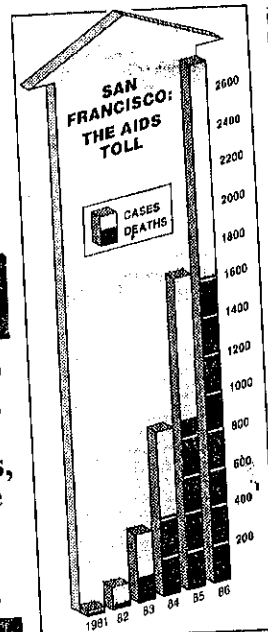
Victims like Meredith Mitchell may eventually be one of them. She is a 32-year-old landscape gardener and one of 22 women in the city with Aids. She was infected by her lover, who has since died, and who caught the Aids virus by injecting himself with heroin from a contaminated needle.

"I agreed to talk to you because I want people to realize that yes, indeed, women get Aids, and yes, indeed, they are people just like you and me," she says. "The only thing I can do now is try to help persuade the public to protect themselves and their loved ones. Remain faithful, use a condom, avoid drugs. Teach your children the real facts of life and don't discriminate against people with Aids. They've got too many problems already."



'I want people to realize that, yes, indeed, women get Aids, and yes, indeed, they are people just like you and me'

Meredith Mitchell, Aids victim



FA 'offside' on AIDS advice

SOCCER chiefs were accused yesterday of fuelling an AIDS panic with their stark "don't share a bath" warning to players.

Footballers have also been told not to drink from the same bottle, and to but back on the use of the sponge if they want to avoid catching the disease — but they can carry on kissing.

The advice, sent by the Football Association of England's 2,000 professional and hundreds of thousands of amateur players, was immediately condemned as "scaremongering and sensationalising" by the Professional Footballers' Association.

"It all seems completely over the top," said PFA secretary Gordon Taylor.

An AIDS expert said the warning made the FA "look stupid", and would cause unnecessary worry.

The FA has advised players: Don't share a bath, but use a shower; don't share toothbrushes or razors; don't drink from the same bottle, but use disposable cups; treat open cuts with a sterile dressing; and use a mouth-piece to give the kiss of life.

FA spokesman Glen Kirton said: "Football, like any physical contact sport, will increase any risk of infection from AIDS, and this document aims to provide players with commonsense precautions.

"But nowhere does the document say that players should stop kissing and cuddling to celebrate a goal.

"It by no means intends to imply or scare people into thinking that there is an AIDS danger in football, any more than there is in society generally."

FA medical chief Dr John O'Hara said: "We are only doing our duty to look after footballers, of which there are more than half-a-million throughout the country."



No ban on soccer's scoring cuddlers.

by Gerald Priestland
AUTHOR AND RELIGIOUS COMMENTATOR

THERE'S only one thing worse than being a 'do-gooder' nowadays — and that is to be a 'moraliser,' especially a Christian moraliser.

That's the trap that James Anderton, Chief Constable of Greater Manchester, has fallen into. Good and evil, right and wrong are apparently not words that policemen are supposed to use any more.

And if they start talking about God they are obviously ripe for the psychiatric ward. Soviet officials would certainly agree.

James Anderton is not everyone's cup of tea — not every churchman's and certainly not every politician's.

He was born a Methodist and is now in the process of converting to Rome, but in his conviction that there are moral standards laid down by God which we defy at our peril he has always been consistent.

Faithful

I have heard him talking as he does now — in uniform and on the record — for the past eight years. One of the questions to be asked is: why such a fuss now? Whose skin has he got under? What is this curious named body the Greater Manchester Police Monitoring Committee really after when it calls for his instant resignation?

Like so many controversial figures, Mr Anderton has suffered from being inadequately quoted.

No question that he sees the AIDS plague as the result of 'people swirling around in a human cesspit of their own making' and that he believed something was speaking to me inside which he had to echo faithfully.

But nobody who heard his modest responses to the BBC's Rosemary Hargill last Sunday could think of him as either insane or as a caricature of an Old Testament prophet trumpeting curses.

He spoke of avoiding intolerance and rejection; of emphasising compassion and understanding.

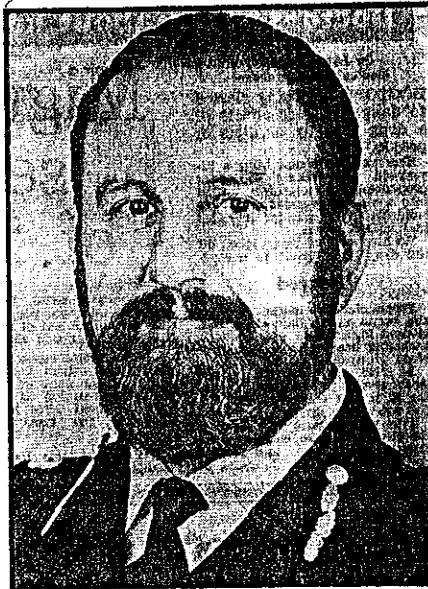
Tradition

When asked if he saw himself as a prophet of God he did, however, add, 'God works in mysterious ways. Given my love of God and my belief in God and in Jesus Christ, I have to accept that I may well be used by God in this way.'

This is no more and no less than any Christian ought to accept — that God may seek to use us for his purposes in our daily life. That can be a heavy responsibility to be taken seriously and nobody can accuse Mr Anderton of lack of seriousness.

What is odd, in a city like Manchester, with its long tradition of high-mindedness, is that it should be thought eccentric for the chief guardian of law and order to see a connection between his faith and his job.

Why
should
we think
it strange
when a
public
figure
proclaims
his faith?



James Anderton: Fed up with the churches' compromises and pronouncements

Anderton and God

A century ago — even less — senior clerics fixated constantly observed the closest links between them. Nor did the pulpit fail to play its part.

That it falls today (in his view) is part of Mr Anderton's case. He is fed up with the churches' compromising pronouncements on moral issues: 'They always add a few ifs and buts and maybes,' he complains.

Dubious

To which the Bishop of Manchester replies cautiously that people with strong moral convictions tend to oversimplify and fail to realise that 'we live in a complex world with many influences on people's behaviour'.

Elsewhere in the church the Chief Constable has been criticised for lack of charity and poor taste.

But must we all speak like Anglican bishops? Is

there no room for the larger than life figure who sees things in black and white and says so?

It is all very well for the church to comment on life non-judgmentally and compassionately — it no longer has much leverage on how people behave anyway.

So now we have the odd situation of the police chief who preaches sermons and the churches who write sociological reports. In both cases we need to be clear whether the object is to make a holy gesture or some practical proposals.

Ironically, when that other well-known gadfly the Bishop of Durham preached to the financiers of the City recently, roasting it for its greed, dubious morality and outrageous salaries, nobody paid much attention. Perhaps if the head of the Fraud Squad had done so, they would.

Where then, is the moral leadership to come from if not

from Christian lay people as well as clergy? It is perfectly true that life is complicated and that the issues can be oversimplified (as they often are with AIDS).

In the abstract, all sin is wrong. But there is no such thing as an abstract sin — only particular cases, all different.

The fact is that some people are weaker than others, some have less all contact with religion, many are under intolerable pressures from a society which is now so de-humanised that it is a miracle more of us don't behave like animals.

Experience

Christians are commanded not merely to save their own private souls but to love — which means care for — one another.

So the Church is not wrong to concern itself with these social and semi-political issues. Nor is James Anderton wrong to do his duty in the light of his faith as he feels it.

And provided he does that duty, why should he not talk about it? After all, he has long experience of the world of which he speaks.

What we need, perhaps, is closer relations between churchmen and policemen; more Christians in the police and more ex-policemen becoming ministers and priests.

Each side would be enlightened by the contribution of the other. And, while we are about it, it would be no bad thing to see a revival of Christian standards in the City of London.

Irish Press
21st January 1987

Campaign on AIDS

JUST a brief note to register my bafflement at the current discussion over a major AIDS awareness campaign, certainly a response is required but it's the scale and content of the response envisaged that is intriguing.

I must confess I cannot appreciate why some people think that vast resources should be spent on such a campaign when I believe it can safely be said that not even in the most remote reaches of the island could a person even hope to avoid being aware of AIDS, of hearing of its history, its effects, what it's about, how it's obtained, how it's not obtained, what it does, what it doesn't do, and if such is the case, of the risk the person runs and how they might stop running it.

Yet now the Government proposes that we be lavishly treated to yet more on a subject that has already been lavishly and sufficiently dealt with for free.

Does the Government mean to tell us that we are all so suitably aware of and informed about all manner of important disease and affliction, their prevention, treatment and otherwise, that there's nothing else of importance in the whole spectrum of public health worthy of vast funding other than the proportionately less significant AIDS virus?

Is it too much to hope that the Department of Health is above vain, unwarranted and extravagant responses to media hype and sectional and

personal interests? Or could it be that our Department of Health has its own, less-than-public reasons for following certain courses of action? Could it be that the Department is making an opportunity for itself out of the AIDS virus, that it might try and face its own set of values on the unsuspecting?

CIARAN MacGUILL,
Ascal na Fadchoille,
Cuar Bhothar Theas,
An Cuan Aoibhinn,
Baile Atha Cliath 8.

5

THE TIMES WEDNESDAY JANUARY 21 1987

Let not the constable judge

Hugh Montefiore, Anglican Bishop of Birmingham, joins in the controversy over James Anderton's remarks on Aids

James Anderton has done us all a service in affirming that "An acceptable moral code in this country is far more important than an enforceable criminal law." Our gravest danger as a nation is our present moral vacuum leading to the disintegration of society.

But I shudder to think what Bishop Butler would have made of James Anderton. "Sir, the pretending to extraordinary revelations and gifts of Holy Ghost is a horrid thing, a very horrid thing," he informed John Wesley. Joseph Butler's was the voice of the Established Church in a distant age of decorum and religious reserve far removed from biblical robustness or contemporary "born again" Christianity.

Adherents of a liberal faith tend to overlook the more lurid passages of the Bible. James Anderton's remark about Aids being spread among people "swirling around in the cesspool of their own making" should be compared to the picture drawn in 2 Peter of sexual depravity: "The dog is returned to his own vomit again, and the sow that was washed to her wallowing in the mire." There was ancient controversy whether 2 Peter (my least favourite Epistle) should be included in the New

Testament Canon — but it got in.

Whether this kind of judgemental language is appropriate is another matter. Personally, I find it negative and counter-productive. The Christian cannot forget the dominical injunction: "Judge not that ye be not judged." That applies to individuals.

Certainly the gross homosexual promiscuity which helped initially to cause the Aids epidemic deserves strong condemnation (as does also heterosexual promiscuity). But it is quite wrong to ascribe Aids to the wrath of God, unless wrath is understood impersonally as the result of flouting the natural law.

Prophets tend to paint in lurid colours with a broad brush, but life's realities are more complex. Whatever one may think of homosexual practice (and it is not easy to condemn a whole class of individuals to lifelong celibacy), there is a vast difference between wanton promiscuity and lifelong devotion to a single partner. The

refusal of religious leaders (which James Anderton so deplures) to indulge in generalizations is not due to their lukewarmness but to their insistence on doing justice to the complexity of the moral scene.

But sex is not the only, or even the most, important aspect of human behaviour. One could instance — as James Anderton apparently does not — the selfish greed which has led to scandals at Lloyd's and financial rip-offs in the City, as well as to the growing number of crimes of horrifying violence against old people.

It was a characteristic of the Old Testament prophet that he had to say words which offended. Jeremiah, who wrestled with the issue of false and true prophecy, exclaimed: "His word was in my heart as a burning fire shut up in my bones, and I was weary with foreboding and I could not stay."

But true prophecy is not merely negative. The Collect on John the Baptist prays that "ministers and stewards of your truth may turn

the hearts of the disobedient to the law of love". This positive note of love seems missing from James Anderton's reported comments, although he claims that selective reporting does him injustice. If so, he deserves heartfelt sympathy.

Christians surely ought to feel "used" by God, and the Church should welcome articulate and prophetic laymen, providing they are neither unbalanced nor fanatical. Whether it is appropriate for them to combine the role of prophet with that of leadership in a secular organization is a matter not for the Church but for their employers. (Their subordinates may vote with their feet.)

No one can fully divorce his public utterances from his public role. It is a matter of thankfulness that our police forces, despite a hammering in certain circles, contain so many Christians; but their public job is confined to the maintenance of law and order. Prophecy is given to an individual. A position of public influence affords great publicity to an individual's prophetic role; but the compatibility of the two is a matter for those in authority to whom such a person is publicly accountable.

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Today
21st January 1987

'100 million may die from Aids'

A HUNDRED million people could die from Aids by the end of the century if a cure or vaccine is not found, an American government official has warned.

Speaking to 6,000 students at the Rev. Jerry Falwell's Liberty University, Surgeon-General Everett C. Koop also said he resented criticism from fellow conservatives and evangelists of his call for sex education to prevent the spread of the disease.

Last October, in a report he was asked to prepare by President Reagan, Koop called for sex education for chil-

when he warned: "Aids could be God's judgment against a nation that chooses to live immorally."

But a Liberty University spokesman said Falwell has since stressed the need for an Aids education programme.

Symptoms

Since January 12 Aids has been diagnosed in 29,435 people in the United States and claimed 16,667 lives, according to the Centre for Disease Control in Atlanta.

The CDC estimates that the disease will strike 270,000 people and kill 179,000 by the end of 1991.

The World Health Organisation said in a report in December that there are now about 100,000 known cases of Aids worldwide.

A million people are thought to have been affected by Aids-related symptoms and five to 10 million people have been exposed to an Aids virus, most of them in the United States and Africa.

WHO officials estimated that there would be 500,000 to three million cases of Aids by 1991, and that the number of people carrying the virus could increase to 100 million.

Not everyone who carries the virus develops the full disease.

from DOUGLAS COPE in Virginia

dren to teach them about Aids, and said abstinence and condoms were the best ways to prevent the spread of the killer.

He said: "One of the things that disturbed me the most is that my own constituents, namely political conservatives and my own religious constituents, namely evangelists, were most critical of what I said."

Falwell, a conservative and popular television evangelist, caused an outcry

Today
21st January 1987

Warm welcome for AIDS drug

SHARES in Wellcome are riding high on its anti-AIDS drug Retrovir which should be available to 12,000-15,000 very severe AIDS sufferers in the US by May. It inhibits growth of the AIDS virus but has nasty side-effects, chiefly anaemia.

At 272p yesterday the shares were near their all-time high of 276p. With only a quarter of the equity available to the market, and plenty of demand both from UK and US institutional buyers, the price is artificially high. But the volatile shares will continue to see waves of demand, so any dip is a buying opportunity.

Retrovir should get the go-ahead for use in the US from the Federal Drugs Authority any time between late February and May. Last Friday an independent panel of medical experts recommended it be approved, for categories it was tested on: AIDS patients who also have had pneumonia, and those with AIDS-related complex.

Retrovir could earn Wellcome \$20m-plus a year once it gets into its stride. (But it has spent \$80m creating it). City analysts say the group should earn £155-165m this year to end-August (against £125m) and £185m-plus in 1987-88.

Wellcome is often called a

by CATHY GUNN

one-product company but this is not quite fair. It is big in anti-cough and cold treatments. Its Zovirax anti-herpes drug is selling well and has just won a UK product licence to be used against shingles.

Zovirax won the Queen's Award for Technological Achievement in 1985, and last year the award went to its muscle relaxant Tracrium. It hopes Retrovir might bring it the hat-trick this year. Her birthday, when the awards are made, is April 21.

Today
21st January 1987

Aids hysteria in the House

WITH Health Secretary Norman Fowler visiting Aids sufferers in San Francisco, the US Surgeon-General warning that 100 million people worldwide will die of Aids by the year 2000 and the Football Association telling players not to swap shirts for fear of catching the disease, hysteria over Aids could reach new heights this week when MPs discover that the killer epidemic may have reached the House of Commons.

Anthony Gilberthorpe, who resigned his seat on Gloucester County Council at the weekend because of allegations that he is visiting an Aids treatment clinic in New York, used to work as a House of Commons researcher for Tory MP Piers Merchant.

"He was with me for nine months in 1984 and then for a period last year," says the vegetarian MP, who himself achieved notoriety last year when he spent a week trying to live on the dole.

Others working with Gilberthorpe in the Commons



FLAMBOYANT: Gilberthorpe

last summer report that he suddenly changed from a conventional-looking Young Fogey into a flamboyant dresser with gold and silver streaks in his hair.

At the time he was doing library-based research for Merchant, MP for Newcastle-on-Tyne Central, on the economic problems in the Northeast.

Gilberthorpe is now incommunicado, following reports that he once kissed Mrs Thatcher at a party conference and has since missed meetings for tests on an un-named blood disease and visited the New York clinic.

Today
21st January 1987

Fury as Aids comics brand Clint gay

EXCLUSIVE by
PAULINE WALLIN

COMICS Mel Smith and Griff Rhys-Jones were condemned last night after joking in a sketch on Aids that film star Clint Eastwood is homosexual.

Rambo actor Sylvester Stallone and movie hero John Wayne are also branded homosexual in the pair's gags about the disease on a dial-a-joke phone line.

Eastwood's spokesman in Los Angeles, Leonard Hirschman, said last night: "Are these guys mad? How dare they say Clint is gay."

Stormed

"We'd slap a million-dollar lawsuit on them if they came to America and said that." And Stallone's press agent, Michael Ortiz, stormed: "What these comics are saying is disgusting."



ALAS: Smith and Jones look understandably nervous

Aids experts and homosexual groups are demanding that the sketch be dropped from the nationally advertised Cablecom phone-in tape, which costs listeners 32p a minute.

David Walters of the Haemophilia Society, many of whose members have caught Aids from contaminated blood, said: "It is wrong to make jokes about something that kills so painfully and worries so many people."

"And it is wrong to advertise it to make money out of it."

"You don't hear cancer jokes or heart attack jokes."

John Edgeall of the Campaign for Homosexual Equality stormed: "This material is disgusting. It's just not on to make jokes about Aids."

Tony Whitehead, who heads the Terrence Higgins Trust which helps Aids victims, said: "It's not funny — it's tacky." And volunteers manning the

Trust's counselling and information helpline in London were furious.

One of them said: "What sort of people think they can make money out of advertising jokes on Aids?"

"And what sort of people will ring up specially to hear them? It's ghastly and makes our job harder."

The row has threatened plans for the Alas Smith and Jones stars to appear in a fund-raising concert for Aids research in April which is due to feature gay pop group The Communards.

Sketch

A Communards spokeswoman said: "I'm sure the band would find the Smith and Jones sketch offensive."

The comedians were not available for comment last night but Cablecom boss Alan Taylor said: "This sketch has been running for two weeks, and we haven't had any complaints."

"We do not believe the material is offensive. It came from a recording of a live tour that Mel and Griff did last year."

"And as you can hear from the laughter, the audience found it very funny."



BRANDED: Eastwood



BRANDED: Stallone



BRANDED: Wayne

ONE OF BRITAIN'S TOP MEDICAL EXPERTS PUTS THE HEALTH MINISTRY'S CONTROVERSIAL CAMPAIGN INTO PERSPECTIVE

HAVE we gone too far in stressing the fact that AIDS is not prejudiced and can strike at anyone regardless of their sexual affinity? I suspect we have.

In a very understandable effort to prevent the fuelling of anti-gay prejudice, we may have found ourselves alarming people quite unnecessarily by giving the impression that an unstoppable epidemic of death is about to wipe out millions of men, women and children in the developed world.

This week has seen the start of the Government's 'Don't Die Of Ignorance' campaign: 23 million leaflets are being sent out to every home in the country.

The advice in the leaflet about promiscuity and condom usage is undoubtedly sound. But the majority of those receiving them during the next few weeks are not promiscuous, are not homosexual, and are not intravenous drug-abusers.

How many of this majority really ARE at risk of 'dying from ignorance'?

The answer may be: very, very few. Unless you belong to the high-risk groups—intravenous drug-addicts and homosexual men—you are highly unlikely ever to be infected by the Human Immuno-deficiency Virus (HIV), the virus which can lead to the full-blown disease of AIDS. Recent television news pictures have shown Norman Fowler meeting AIDS victims in San Francisco—every one of those victims was a homosexual man.

Burden of risk

No one denies that HIV, the so-called 'AIDS virus', can be spread from a man to a woman, and vice versa, but the fact is that it is very rarely transmitted in normal heterosexual intercourse when there are no other high-risk factors present.

'Ah, but what about Africa...?' I hear you say. The example of Africa—where the disease is rife in the heterosexual community—is often quoted by those seemingly anxious to share the burden of risk with the whole population.

But is the African experience about to become our experience? I don't believe it is.

The reason for my cautious optimism about AIDS lies in the lessons learnt from another virus infection, Hepatitis B.

This is spread in the same way as the 'AIDS virus'—by transfusions of contaminated blood; from mother to baby and, most significantly, through any sexual activity which enables the virus in the semen to enter the bloodstream of a sexual partner. (Although, unlike AIDS, it is rarely fatal, victims do develop immunity and they may not remain infectious indefinitely.)

Rapid

In the West, Hepatitis B is particularly common among homosexual and bi-sexual men, and highest among those practising anal intercourse.

The reason why anal intercourse is so dangerous, in the case of both AIDS and Hepatitis B, is that it can cause tearing and bleeding in the lining of the anus: the virus has thus found a very rapid route into the bloodstream.

Now Hepatitis B is much more infectious than AIDS, and since it is passed on in the same way, then we should find Hepatitis B roaring unstoppably through the general population. It isn't. Hepatitis B is found primarily among the same 'high-risk' groups as AIDS—intravenous drug-addicts, male homosexuals and those who have received contaminated blood transfusions. The spread of Hepatitis B



WOMEN AND AIDS

Has the hysteria gone too far?

by Dr David Barlow

CONSULTANT WORKING WITH AIDS VICTIMS AT
ST THOMAS'S HOSPITAL, LONDON

into the heterosexual community is minute.

But now let's go back to Africa. Hepatitis B, in Africa, spreads into the heterosexual community: almost as many women as men are liable to be infected, exactly the same as AIDS there.

I believe that in Africa, during heterosexual intercourse, the Hepatitis B virus and the AIDS virus in the semen have found a rapid route into the bloodstream which is not found to the same extent in the West.

Could that route be the large amount of genital infection already present among Africans of both sexes which, due to lack of medical facilities, goes untreated.

Infections like, for example, NGU (non-specific urethritis) make the delicate skin of the female genitals very much more vulnerable to the AIDS virus.

Heterosexual intercourse with a healthy woman rarely involves tearing of the skin. But if that skin is already damaged by untreated infections it may not provide enough protection against the AIDS virus and, as in the case of anal intercourse, the virus can be very rapidly transferred into the bloodstream.

Thus a bisexual man who is infected with AIDS can give the disease to a woman during normal sexual intercourse.

Equally, once a woman is

infected this way, and she has more than one sexual partner, she can then pass the disease back to a heterosexual man. For the AIDS virus will be carried in her vaginal fluid, and if the man has a genital infection involving cuts or open sores, the virus immediately has access to his bloodstream.

Optimism

This could well be the reason the disease is spreading fast in Africa among the heterosexual community.

However, in the affluent West, with the wider availability of treatment for such infections, it's most unlikely that the African experience with AIDS (and Hepatitis B) will be replicated.

And there is already evidence that my guarded optimism is justified. After all, in America where the AIDS 'epidemic' first took hold, there have been at least seven years for the disease to spread into the heterosexual community.

But an African-style epidemic of heterosexual AIDS has not occurred: in fact the percentage of infected heterosexuals who have none of the

high-risk factors has remained constant at 4 per cent.

In Britain, the number of AIDS cases has risen alarmingly—but only among those in the recognised high-risk groups. Of the AIDS cases reported so far to the Communicable Disease Surveillance Centre at Colindale, 92 per cent. are among homosexual or bisexual men, 6.5 per cent. have resulted from blood transmission (haemophilia, blood transfusion recipients and intravenous drug-abusers).

Only one per cent. of all cases are among heterosexuals with no risk factors. As in America, there's no sign of change in these percentages.

There are probably upwards of 50,000 people in the UK who are already infected with the virus, the vast majority being male homosexuals and drug-addicts.

But gay men are already significantly altering their sexual behaviour and there's some evidence that addicts are turning to alternative ways of getting their fix.

For those already infected, of course, the outlook is bleak and looking after them will put a severe strain on limited facilities.

But it is just possible that none of the infections in this country have already occurred and that the number of these tragic cases will eventually diminish. In fact the doubling time for the number of cases in New York has already stretched from nine months in 1983 to 14 months in 1986.

Room, if not for optimism, perhaps for a little less pessimism—and a great deal less hysteria about a 'new Plague' about to sweep Britain.

Hospital video on dangers of AIDS

By COLIN KERR

A DUBLIN-BASED company has produced an AIDS video which is now available in hospitals in Ireland and Britain.

The video, which was made in Dublin, is the only Irish produced video giving information on the killer disease.

It is made with the help of the Royal College of Nursing, in Britain.

Martin Byrne, chief executive of makers Calsoft said the video is directed at the nursing profession and has been approved by An Bord Altranais, the nursing board.

Mr. Byrne said that although they have distributed a variety of videos for nurses in the past, the AIDS video is the first video of its kind they have produced.

"It's not a clinical video", said Mr. Byrne, "and it's not emotive."

"It's aimed at the medical profession and at the nursing profession in particular and we've been very pleased with the response we've got both from hospitals in Ireland and in Britain".

Mr. Byrne said that

the production of the video was a purely commercial venture and they had not received any state assistance.

Noel Daly, chief executive of An Bord Altranais, said that although they were not involved in the making of the video they had no objections to it. They would recommend it to nurses training schools seeking information on the subject.

"We would also hope," said Mr. Daly, "that when the Government produces its AIDS information package, that it would include information aimed at people responsible for the care and management of AIDS victims".

Independent
22nd January 1987

FF view on AIDS

The Government's proposed explicit campaign to combat the AIDS threat may be examined again by an incoming Fianna Fail Government, Opposition Health Spokesman Rory O'Hanlon has warned.

He said there was a necessity for any literature in the campaign to make it clear that the use of condoms only reduced the risk of AIDS but could not eliminate the disease.

Dr. O'Hanlon added that a single partner was the ideal solution to the problem, but where people had more than one partner, they could consult their family doctor about protection.

Dr. Brian Lemass, County Physician at Nenagh Hospital told North Tipperary Health Committee he was not aware of any scientific evidence that condoms ensure protection against AIDS.

Dr. William Herlihy, Thurles, said anyone suggesting that condoms were a protection against AIDS was living in cloud cuckoo-land.

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Irish Press
22nd January 1987

Doctor in Aids row

A doctor who said schools should issue condoms to children to protect them from Aids has been suspended and may face disciplinary action, his employers said yesterday.

Dr. David Josephs, director of community medicine in south Bedfordshire, said teachers should explain the disease to pupils from the age of ten, and condoms should be freely available to children who have begun to experiment with sex. Last night South Bedfordshire Health Authority announced that it had suspended him.

Irish Times
22nd January 1987

IRISH TIMES

10 OLIER STREET, DUBLIN 2
WEDNESDAY, JANUARY 22, 1987

AIDS AND THE BISHOPS

Sir,—I do wish that they would cease, and desist from, their persistent efforts to annoy and upset me and force me to write letters about them to *The Irish Times*!

Could the Rev Leahy (letters, January 17th) explain *exactly* what is meant by the words he quoted from "Humanae Vitae": "Each and every marriage act must remain open to the transmission of life"? Taken literally it must mean that sexual intercourse cannot, without being sinful, take place (1) between infertile couples (2) once the woman is post-menopausal and, most interestingly (3) during the "safe period" of each cycle.

I am sure Father Leahy is aware of the change in the teaching of the Catholic Church which now states that procreation is no longer considered to be the only purpose of sexual intercourse, nor is it even held to be the primary purpose. It has, a long time ago, been assigned co-equal status with the mutual satisfaction of the couple.

I believe that the words "intrinsically evil and seriously sinful," quoted by Fr Leahy,

need to be looked at very carefully in future translations into English of the various documents that emanate from the Vatican. Some years ago we were given these same words in relation to masturbation. How ridiculous, apart from being unchristian, to accuse the infant and the young child of being evil and sinful. Because the occasional official saint has accused himself of sinning in his mother's womb or in his pram are we all to be condemned before we reach the also interestingly decided upon age of reason? Have all our pious efforts thereafter been in vain if we have not confessed our infant sins?

Would some moral theologian care to comment on my comments?

I have been told that there are interestingly different ways of translating Latin, depending both on the language into which it is being translated and on the particular slant that may be desired by the hierarchy of each country.

— Yours, etc.,

MAEVE FITZGERALD,

Chestnut Lane,
Dangan Lower,
Galway.

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Today
22nd January 1987

TODAY, THURSDAY, JANUARY 22, 1987

ward on the Aids front line and keep smiling



SISTER WITH SPIRIT: Mary Anthony provides the care, her Aids patients teach her courage

Picture: DAVE HILL

Infectious diseases going. I tell them that we are far more protected than anyone sitting on a bus. There you never know who's going to be next to you — they might have measles or TB — but we know what we are doing, and are prepared."

The atmosphere on the ward is unexpectedly relaxed. Sister Anthony's philosophy is to "keep smiling", positive thinking being one of the key factors in getting well.

"It is only practical," she says. "If you are depressed under any circumstances, it does lower your immune system."

"Even if you have a row with your boyfriend, you will find yourself suddenly catching cold. For our patients it can be vital to think forward and think on."

The patients have private rooms but can mix with one another at will.

The ward is often lively — an Aids party was held to celebrate Christmas — and friends are allowed to stay.

Each room has a fridge and patients are allowed to keep their own food and heat it in Sister Anthony's microwave oven.

Self-protection means constant changes of aprons and gloves. "Sometimes it feels as though we do nothing all day but change in and out of our aprons," she says, "but that is necessary to be safe."

"Mind you, things have changed a lot. Four years ago we wore masks. Then I was sent on an educational trip to San Francisco and New York and my thinking completely changed."

SHE was amazed at how relaxed, how well organised the Americans seemed. "They were so much better than us, so far ahead, not just in nursing but in community care, right down to providing sufferers with proper, warden-controlled flats."

"What I wasn't going to do for Aids when I got back was nobody's business. But unfortunately I had forgotten about the shortcomings of the

NHS." The government campaign, she says, is simply too late. "All of us who were working with patients realised four years ago how serious this situation was."

"Up to now most patients have been gay, but we are starting to see heterosexual sufferers, which shows how the disease has spread. If we are not careful, it will be all we can do to keep it under control."

So far, virtually all the patients that Sister Anthony has treated have died.

There are no definitive rules about Aids. Some patients will develop the disease but survive with short, intermittent spells in hospital. Others will be struck by a virulent, opportunistic infection and be on the road to death.

Complications that are beginning to emerge, such as retinitis, which can cause blindness, and meningitis, which can lead to dementia or fits, make matters worse.

The first question that newly-diagnosed Aids suffer-

ers always ask is, "How long have I got?" Trying to answer that and similar questions turns the whole concept of nursing around.

"In days gone by I cocooned them," says Sister Anthony. "Your first instinct is to protect someone facing a situation like that. But in some cases that makes things worse."

GOING back out into the world after the security of St Mary's has caused panic attacks in some patients. They have telephoned, giving exaggerated accounts of their diarrhoea, in order to be taken back into care.

Aids sufferers seem to follow an emotional pattern of denial, anger and, finally, acceptance, she says.

"First of all, someone will be an absolute pain of a patient, complaining about absolutely everything and not talking about their diagnosis at all."

"You just have to wait and talk. The majority of patients are not worried about dying,

as such, but *how* they die. Like everyone, they want to die without pain."

"It can be worse for the lovers and friends who are trying to give them support. A patient can deal with his own mortality, but it is very hard for those who are left behind."

"Occasionally when a patient has died I'll get a phone call from a lover simply saying, 'I'll miss you.' They get used to having us around to talk to and help them along. When the patient dies, all of a sudden they're alone."

She is unequivocal in her attitude to death.

"It is a blessing. Our attitude is to think positively and be cheerful, and if I have learned nothing else here I will have learned about courage."

"I know survival is our strongest instinct, but sometimes I look at them and think, 'How do they do it? I wonder how they have the strength to keep going at all.'"

ST. MARY'S: America's amazing support centre

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Today
22nd January 1987

TODAY, THURSDAY, JANUARY 22, 1987

How random thoughts can become classic clangers



TONGUES TWISTED? Norman Tebbit and James Anderton fall foul of public speaking

ONE reason I have never wanted to be a politician or any other sort of public figure is fear of putting my foot in my mouth.

Being the kind who says whatever comes into his head, I feel much happier that my public utterances appear only in newspaper columns. Since I have to write them down I have a chance to think before I pronounce.

But if I were let loose in the saloon bar of politics my random thoughts would almost certainly be taken down and used in evidence against me.

Two public figures are currently in the dock for what they have said, or are alleged to have said. One is James Anderton, the Manchester chief constable, who undeniably did say that "God moves in mysterious ways" and that God might be using him in his moral campaign.

The other is Norman Tebbit, the Tory party chairman, who has been quoted via an anonymous source as saying that nobody with a conscience votes Tory.

Mr Tebbit denies saying anything of the sort and threatens to sue the newspaper that claimed he did. Even if he did use those words I wouldn't necessarily be too hard on him. Everything would depend on how he said it.

Joking

Was he joking? Making a wry crack at the cynics? Taking a hard-nosed look at who might be persuaded to vote for his party?

Was he smiling? Looking vinegary? Talking to friends? Did he have his fingers crossed?

But I did hear Mr Anderton. While lying in the bath last Sunday morning, to be exact. Although he did use the words now being turned against him, in the context they did not seem bizarre.

A Labour councillor accuses Mr Anderton of claiming to have been chosen as a prophet. That was not how it sounded. Mr Anderton's interviewer led him through his religious views to the

Watch your mouth sir, there could be a foot in it . . .



by
ERIC JACOBS

point where he could hardly deny that they influenced his attitude to his job.

Far from making a boastful claim to be God's prophet, he seemed to do no more than allow that perhaps God was using him for His purposes. Isn't that what many Christians believe God does? I certainly didn't feel like rushing for the telephone and crying "scoop".

But this kind of misunderstanding is one of the perennial hazards of public life. Back in the 1960s, I remember Harold Wilson getting involved in a tussle with

the trade unions. He invited union leaders to Chequers for crisis talks and during a break he strolled with them in the grounds.

Shortly beforehand there had been a much graver crisis: the Russians had sent their tanks into Prague. With this at the back of his mind, Wilson remarked to the trade unionists that they'd better get their tanks off his lawn.

When leaked it sounded wonderfully dramatic. As though Wilson were an heroic Czech leader defying the dastardly Russians in their tanks. But in fact, so one of the union leaders told me, it was a joke that no one took seriously.

Too bad. It is now firmly lodged in history as a kind of verbal shoot-out at the Chequers corral.

There have been many more such misunderstandings. Hartley Shawcross, when attorney general in Attlee's government, was quoted as saying, "We (ie, the

Labour Party) are the masters now." What he actually said was: "We are the masters for the time being." The first version stuck.

Then there was James Callaghan. When prime minister, he returned in 1979 from a summit conference in Guadeloupe to a Britain torn by strikes. He is supposed to have said at the airport, "Crisis—what crisis?"

Actually, that was a newspaper headline. What he was trying to say was that, compared with the mighty issues of nuclear war he had been discussing, we should keep a sense of proportion about a mere handful of strikes.

A couple of years ago the Tory Minister Alan Clark was quoted as having talked about immigrants being sent back to "Bongo-Bongo land". To his critics, Mr Clark was being abusive about blacks, a racist. However he meant it, Mr Clark's reputation has never entirely recovered.

These little verbal mishaps did no harm to anybody except the unfortunates who were quoted—or misquoted—as having said them. My own favourite example had more serious consequences.

Legend

According to legend, the Paris mob was rioting one day and the infuriated king sent for his captain of the guard. As the captain approached, the king coughed. "Ma sacree toux," he spluttered, meaning "My damned cough". But the captain understood him to say "massacrez tous", meaning "massacre the lot". Which the captain promptly did.

Whether that story is true I don't know. But it does underline the need for public figures to mean exactly what they say.

Soldiers used to be given this example of how imprecise speech could spoil a message. The word the commander at the front wanted to send back to HQ was: "Am going to advance. Send reinforcements." By the time it reached HQ by word of mouth, it was: "Am going to a dance. Send three and fourpence."

The moral for public figures is: watch your tongue and be careful who's listening. It is the harsh price of success in their unforgiving world. And the reason I shall never try to enter it.

Big Plumb

by RUPERT MORRIS

EUROPEANS who still wince at the memory of former prime minister Ted Heath's attempts at French were relieved yesterday when Sir Henry Plumb, newly elected as Britain's first president of the European Parliament, stuck to his native tongue for his keynote speech.

A ruddy-faced farmer from the Cotswolds who left school at 15, Sir Henry has few pretensions, linguistic or intellectual. He is described by colleagues as "clubbable", "unflappable" and "reassuring". He was president of the National Farmers' Union from 1970 to 1979, since when he has been a leading Conservative MEP.

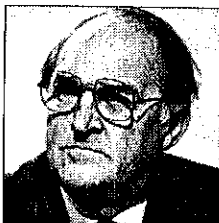
His speech yesterday began with the obligatory tributes to his French predecessor Pierre Pflimlin, an arch-enemy who did his utmost to thwart the Plumb candidacy. By a strange coincidence Sir Pflimlin's name

in Alsatian means Little Plum. Sir Henry's substantial figure might entitle him to be called Big Plumb. But he wisely avoided any such jokes. Instead he did the sensible thing and waded into the Americans.

The impending trade war between the United States and Europe is likely to be one of the major problems in the next 2½ years of Sir Henry's presidency, which is an unpaid post but has generous expenses.

Likening the dispute to an argument in a children's playground, Sir Henry said: "Speaking as a friend of the US, I would advise them that if there's a punch-up they will be the ones to get a bloody nose."

Continuing in the no-nonsense vein, he challenged Americans to decide whether



WILLPOWER: Sir Henry

they wanted a united Western Europe or a united Eastern Europe.

Although the European Parliament leaves major decisions to the Council of Ministers and the EEC Commission, Sir Henry's new job will make him a potentially influential figure in European politics.

Neither wet nor Thatcherite, he is a dedicated European who will defend British and European interests with all the grit of a shotgun-wielding farmer patrolling his land.

SL