

# Print Media



HIV  
Ireland

National HIV and AIDS

Archives

#NationalHIVArchives



1st to 5th July 1987

Daily Mail  
1<sup>st</sup> July 1987

## AIDS blood donor on murder bid charge

LOS ANGELES: An AIDS victim has been charged with attempted murder for selling his blood — the first case of its kind in America.

Male prostitute Joseph Markowski, 29, who was informed that he had the killer disease six months ago, told police that since then he had sold blood to blood banks up to 23 times.

According to district attorney Ira Reiner, Markowski said: 'I know that AIDS can kill, but I was so hard up for money I didn't give a damn.'

Markowski is also said to have had sex with five men since finding out he had AIDS.

# Prostitute's tale sparks Swiss row over Aids

From Philip Jacobson, Zurich

Behind the prim facade of this Swiss citadel of commerce, a bitter confrontation is developing over the right of journalists to protect confidential sources versus the right of the public to be protected from Aids.

In a case that is sure to raise far-reaching legal and ethical issues, the Zurich public prosecutor has charged three employees of the state television service, DRS, for refusing to reveal the identity of a prostitute they interviewed in the course of a programme investigating why Switzerland has the highest proportion of Aids cases in Western Europe.

During her two minutes on screen, with her face hidden and voice disguised, Yvonne, a drug addict and confirmed Aids sufferer, said she was continuing to have sex with clients without using condoms.

As the programme pointed out, more than 10 per cent of Zurich's 800 to 900 regular prostitutes were both drug addicts and carriers of the Aids virus. The implications are deeply disturbing.

"We set out to demonstrate how Aids can be spread beyond the most commonly affected groups by men using the services of prostitutes..." said Mr Daniel Eckmann, the DRS spokesman. "To make the programme credible and realistic, we felt we must show someone like Yvonne describing exactly how she operated, and to secure her co-operation we had to agree never to reveal her proper name."

Yvonne's sombre contribution seems to have had the desired effect. A few weeks later, the city's public health authority began distributing leaflets in the red-light district exhorting prostitutes to join its anti-Aids campaign by always using condoms in their trade. Soon afterwards the University of Zurich hospital reported the beginning of "a distinct change of behaviour in the circles concerned".

But the DRS programme also attracted hostile attention. According to the public prosecutor for the canton of Zurich, the editor of a city newspaper requested (as any private citizen may do) the initiation of legal proceedings against Yvonne. Under sec-

tion 231 of the Swiss penal code she could be accused of knowingly spreading "a dangerous contagious human disease", and face up to five years in jail.

The vice squad, however, failed to find Yvonne, and so the police asked the DRS executive board for her identity. This was firmly refused. The three journalists who made the programme also refused to reveal her name, despite warnings that they themselves could be charged with obstruction of justice.

"There are many other ways in which the prosecutor's office can pursue investigations into drug-addicted prostitutes," the DRS declared in a defiant statement. "We cannot accept the criticism that

**Los Angeles — An Aids victim who allegedly knowingly sold his own contaminated blood to a blood bank, has been charged with attempted murder (Ivor Davis writes). The District Attorney said "the charges were necessary to protect the public".**

proceedings have been made impossible by the journalists' refusal to disclose the name of this woman."

As all concerned with the "Yvonne affair" concede, it raises a number of extremely sensitive questions. In the face of the threat that the Aids epidemic represents, can journalists anywhere morally sustain their traditional right to protect sources?

Next month, the latest quarterly report of confirmed Aids cases in Switzerland will reflect the unusually rapid spread of the disease here. Since June 1984, the figures have shown a more than 30-fold rise to just under 230 cases. Proportionally, in Britain, that would mean 2,000 cases, that is twice the actual reported number.

Meanwhile, the search for Yvonne seems to be getting nowhere. The three DRS journalists remain adamant that they cannot renege on the promise to protect her identity and the Swiss Journalists' Union applaud their stand. Putting the DRS journalists on trial, it argues, would only strengthen the case for a law that confirms their right to professional secrecy.

Daily Mail  
2<sup>nd</sup> July 1987

# Mosquitoes can harbour AIDS

From RICHARD LAY in New York

MOSQUITOES can carry the AIDS virus, but there is no evidence that they can spread it, it was revealed yesterday.

American researchers at the National Cancer Institute in Maryland found that mosquitoes injected with virus-infected blood later had the virus in their bodies — the first time survival of the virus in

mosquitoes has been established.

But Dr Robert Gallo of the NCI was quick to emphasise, 'We have no evidence to suggest mosquitoes can or do transmit the AIDS virus under laboratory conditions.'

Studies in both Africa and the U.S. support this theory for two reasons.

On both continents, AIDS victims tend to be sexually-active people aged between 25 and 40.

Researchers say that if mosquitoes or any other insect could spread AIDS then the disease age pattern would be different.

And in South Africa earlier this month, researchers found that mosquitoes allowed to drink AIDS-infected blood could not pass on the virus to pure blood.

THE AIDS CRISIS creates new businesses and markets.

Growing awareness of the fatal disease spawns new products ranging from a variety of AIDS tests to gold-plated condom carriers. AIMS Biotech, Vancouver, develops a new type of direct test for the virus; it plans marketing through a chain of its own laboratories. Gettig Technologies, Spring Mills, Pa., develops a syringe injector designed to reduce the risk of contaminating health-care workers. At least three AIDS newsletters begin publication. "We've been growing at about 18% to 20% a month," says James Applebaum, editor of the seven-month-old AIDS Record.

AIDS also becomes a popular marketing pitch for existing products. Insure Inc., Belleville, N.J., packages "Anti-Aids" condoms to sell in cigarette vending machines. Finding some of its products recommended for protection against the virus, Lab Safety Supply, Janesville, Wis., puts out a special brochure on AIDS supplies.

*To keep executives up to date on business opportunities, consultant Robert S. First Inc. schedules an "AIDS Business Update" conference.*

\* \* \*

# AIDS MOZZIE

# SCARE

# DENIED

MELBOURNE: National AIDS Taskforce head David Pennington today moved to head off fears that mosquito bites could spread AIDS.

Researchers at the United States Centre for Disease Control have found mosquitoes can carry the live AIDS virus but have not established whether they can pass it on to humans.

But Prof. Pennington today said 2 years of research in Central Africa, where AIDS is most prevalent, had found no evidence insects could transmit the deadly virus.

Research in America had repeated work done by Prof. Chermann at the Pasteur Institute in Paris, which found mosquitoes which ingested infected blood from a person with AIDS could carry the live virus.

"But the question of importance is whether AIDS can be transmitted by the mosquitoes," said Prof. Pennington.

He pointed to diseases such as malaria which can only be transmitted by mosquitoes when the virus actually grew in the insects' salivary glands.

The American study has not yet established whether that was the case.

The head of the American research team, Dr Robert Gallo, said the AIDS virus did not reproduce in mosquitoes and



Prof Pennington

was present in too small a dose to cause infection.

Prof. Pennington said careful studies in Central Africa had shown the spread of the disease bore no relationship to insect bites.

"AIDS has the opposite of the pattern with insect bite transmission," he said. "It is predominantly a disease of cities and towns and is not common in children."

And a storm of protest erupted in London today after Britain's doctors decided they need not ask patients before carrying out AIDS tests.

Specialists and MPs warned that people who feared they were infected would be driven underground.

The Department of Health questioned whether taking patients' blood for a secret AIDS test was legal and said doctors might be committing an assault.

# Bring condoms to the disco advise new city AIDS group

by Cathy Halloran

PEOPLE who go to discos in Salthill, or indeed people who will be travelling abroad during the year have been advised to carry a packet of condoms with them and use them in the battle against AIDS, a new AIDS co-ordinating committee in Galway has said.

The advice has come from the Western branch of AIDS Action Alliance, a national collective body of voluntary groups working with AIDS affected people, spearheaded in Galway by Evelyn Stevens and Angela Savage, both of whom work in UCG.

One of the first groups to be affiliated to the new branch is CAIRDE which will

befriend and support people with AIDS, or people who find they are AIDS antibody positive, as well as their friends, relatives or partners.

Both women said they were aware that because of the social isolation which AIDS sufferers are subjected to, one of their greatest needs is friendship and support and companionship.

"CAIRDE will be made up of non-judgemental, caring individuals, who will be able to accept the disease itself, and above all will be able to keep a confidence.

"Already we know of several GP's who have sent in AIDS tests with people's names on them, which is extremely frightening for people with AIDS."

Speaking at a press conference this week to announce the setting up of CAIRDE, both women said that there are at present five AIDS antibody positive people in the West of Ireland, but this figure represents the number of people who have actually had a test and have been notified to the Department of Health. The real figure could be much higher.

"The Alliance campaign will also focus on getting the public more informed about the disease. People will have to realise that this is not a homosexual disease, and people in the West who think they are safe just because they are not Gay are just fooling themselves."

"However, having said that, the number of people carrying the disease in the West is still quite small, and with a properly-informed community, we can keep it that way. But this is still not grounds for complacency.

"There are an enormous amount of students in Galway City, and indeed people in Connemara who will be travelling abroad, and will be exposed to the disease, and it is vital that they are informed", she added.

The group hope to set up a training course for CAIRDE volunteers in September. Anyone wanting to get in touch with CAIRDE can ring either Evelyn or Angela at UCG, Telephone

# Daily Mail special on the killer disease that is causing panic

From PETER MARK  
in Vienna

SEVEN teenagers in a single school class have caught AIDS after injecting themselves with heroin from an infected needle.

And two other people outside the school also caught the disease by having sexual intercourse with some of the infected pupils.

The scandal, at a Vienna school, outraged Austria, which believed it was barely touched by the disease, with only 95 reported cases, of whom 54 have died.

It came to light when one of the pupils had an AIDS test, with

## Frightened ambulance men take action

DOCTORS were urged yesterday to confide in ambulance crews if their patients were suffering from infectious killer diseases such as meningitis, hepatitis or AIDS.

The call came from Mr Keith Nuttall, chief ambulance officer for Berkshire, after it was revealed that some ambulance men, fearful for their own safety, have been opening and reading confidential letters sent to hospitals with ambulance patients.

Fears about ambulance men's safety increased after one crewman Mr Ken Ford, 41, contracted meningitis — possibly from a patient. Mr Ford, of Emsbrook, Wokingham, had to have his toes amputated and needed plastic surgery.

# Shock sweeps a nation as seven in one school class fall victims

positive results. He confided in a member of the privately run 'AIDS Hilfe' (AIDS Help) organisation that others might be infected. Then came the catastrophic results.

An Education Ministry spokesman said the infected pupils would remain in class as AIDS was not infectious, other than by sexual contacts or through injections with

contaminated needles.

The identity of the victims was not being disclosed.

The spokesman also announced that there would be a massive information campaign directed against the dangers of both AIDS and drugs in all Austria schools when the autumn term opens in September.

Teachers are to have special training.

Last year parliament passed a law making doctors report AIDS cases to the health authorities.

Health Minister Franz Loschnak said the health authorities would redouble their efforts with anti-AIDS publicity.

# Storm as doctors agree to secret blood tests for AIDS

A STORM of protest erupted last night after doctors decided that they had the right to give secret blood tests to patients they suspected of carrying the AIDS virus.

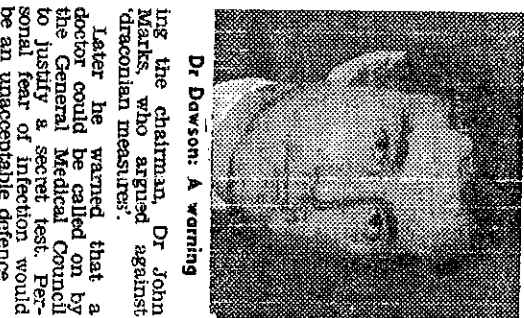
Specialists in the disease warned that people who feared they were infected would be driven underground. And at Westminster MPs condemned the move.

The Department of Health said that taking patients' blood for secret AIDS test might be illegal and pointed out that doctors might be committing an assault.

The National Council for Civil Liberties condemned the doctors' decision as a 'panic approach'. The move came yesterday at the conference of the British Medical Association in Bristol

By JOHN ILMAN  
Medical Correspondent

after a long and emotional debate. To cheers speakers argued that medical and nursing staff should not be placed at risk. They had to think of their own health care as well as that of patients.



Dr Dawson: A warning

ing the chairman, Dr John Marks, who argued against draconian measures.

Later he warned that a doctor could be called on by the General Medical Council to justify a secret test. Personal fear of infection would be an unacceptable defence.

And assistant BMA secretary Dr John Dawson said a patient rejected for a mortgage test might be able to take legal action for civil damages.

The decision taken by the meeting has no legal standing but BMA conference decisions often become enshrined in daily medical practice.

### Limited

There was swift reaction at Westminster.

Dr Samuel Galbraith, Labour MP for Strathkelvin and Bearsden, and a member of the GMC said: 'A test that involves withdrawal of blood is an assault unless the patient has consented to it. I think the legality of this decision is in question.'

And Dr Gavin Strang, Labour MP for Edinburgh East, said:

'The Government will now have to address itself to this issue.'

Mrs Sarah Spencer, secretary of the National Council for Civil Liberties, said that tests would provide only limited information about the spread of AIDS.

She added: 'But the limited nature of that does not outweigh the cost to an individual's privacy and the freedom to decide what happens to one's own body.'

The Department of Health said last night that it would study the BMA motion carefully.

A spokesman said the Government's Chief Medical Officer wrote to all doctors last December making it clear that the decision to be tested or not was something the doctor should discuss with the patient before proceeding.





# Health cuts hit sex clinic services

DUBLIN'S main sexually transmitted disease clinic is facing severe disruption because of health cutbacks.

At a time when the Aids problem is putting increasing pressure on STD clinics, St. James Hospital, which is one of only two hospitals with STD facilities, has had to cut back on its services because of lack of financing.

Family doctors who previously had direct access to the hospital's laboratory, which tested for sexually-transmitted diseases, have had that service withdrawn and further cuts could be on the way.

And the cuts have come at a particularly bad time for the hospital which is facing an increased workload because of fears about AIDS and because of the appointment of a new consultant in genito-urinary medicine.

According to a report in the Irish Medical Times, the consultant's clinic is being attended by up to 90 people per night seeking treatment and tests.

But, while services at the St. James's Clinic are being hit by the cutbacks, the clinic at the Mater Hospital is continuing to operate normally, because of different financing arrangements.

The Mater STD clinic is being funded by the Eastern Health Board but St. James's has to pay for its clinic out of the general hospital allocation from the Department of Health.

Doctors at St. James's now want to have their clinic funded by the Eastern Health Board on the same basis as the funding of the Mater clinic.

A spokesperson for the hospital said the same service is being provided by both clinics and that the St. James's clinic is as much a community service as the Mater.

EVENING PRESS, FRIDAY, JULY 3, 1987

# 24 opera artistes killed by AIDS

From JEREMY CAMPBELL in Washington  
THE NEW York City Opera has lost two dozen of its artistes to AIDS, a symptom of the way the disease is rampaging through the American music world, wiping out singers, musicians, conductors and stage directors.

An investigation into the impact of AIDS in the arts has been prompted by the death of Michael Bennett, the choreographer who conceived and directed "A Chorus Line" and other hit Broadway musicals like "Follies" and "Dream Girls". He died of cancer caused by AIDS.

Opera singer, Roberta Peters, called the effects "devastating; the arts are losing so many creative, talented people". Her piano accompanist, Larry Scrivaks, died in March of AIDS. Pianist Paul Jacobs is another victim.

So is dancer Charles Ward

and actor director Charles Ludlum, founder of the New York Theatre of the Ridiculous, make-up and hair designer for Broadway shows.

The in memoriam list runs into hundreds. Among these are Alan Atkinson, a well-known designer. He had illustrated 25 books of stories.

# Doctors demand secret Aids tests

INDO 3/7/87

By Nicholas Timmins, Health Services Correspondent

DOCTORS yesterday demanded the right to test patients for Aids without necessarily seeking their consent. Their demand was criticised by Aids specialists, voluntary organisations and some MPs.

The decision to back secret testing split the British Medical Association's annual meeting in Bristol and dismayed its leadership, which has taken a lead in educating the public about Aids.

Consultants at the meeting claimed routine testing before surgery was necessary to protect their families, patients and other health care staff from infection.

But the decision brought warnings from Aids specialists that testing without consent could

make control of the epidemic harder, and could drive Aids underground.

The Department of Health said there was a question over whether such testing was lawful. Samuel Galbraith, the Labour MP for Strathkelvin and Bearsden, a neurosurgeon and member of the General Medical Council, said: "I would question whether or not they are right to do this. A test that involves withdrawal of blood is an assault unless the patient has consented. I would certainly urge that we always try to obtain the patient's consent."

Dr Michael Adler, the Aids specialist at the Middlesex Hospital, London, and a Government adviser on Aids, said: "Allowing potential patients to feel that any doctor sticking any needle into them may be testing them for HIV without their consent will inevitably drive risk groups underground."

The Terence Higgins Trust said it was "a great step backwards for the medical profession. It will make control not just of Aids but of other diseases more difficult."

"A patient who thinks he has Aids but does not want to be

tested and in fact has cancer may put off going to the doctor until the last possible minute for fear that he will be tested without his consent.

"This decision goes against Government policy which is that anyone who is tested should be counselled both before and after. How can you test someone without consent while counselling them beforehand? It is ridiculous." The test did not prove that someone did not have Aids.

The Department of Health said doctors had been advised that the decision on whether or not to test should be discussed first with the patient.

**Irish Press**  
**3<sup>rd</sup> July 1987**

## **Dance director dies of AIDS**

Director and choreographer Michael Bennett, the mastermind behind "A Chorus Line", the longest-running musical in Broadway history, died yesterday of lymphoma caused by the AIDS virus, according to his lawyer. He was 44. Attorney John Breglio said Bennett died at his home in Tucson, Arizona, where he moved to last year, for treatment after he had been diagnosed as having Acquired Immune Deficiency Syndrome.

# Doctors' decision on secret AIDS test condemned

A STORM of protest erupted last night after Britain's doctors decided they need not ask patients before carrying out AIDS tests. Specialists in the disease warned that people who feared they were infected would be driven underground. At Westminster, MPs also expressed concern.

The Department of Health questioned whether taking patients's blood for a secret AIDS test was legal and said doctors might even be committing an assault. The National Council for Civil Liberties condemned the doctors' decision as a "panic approach," and Professor Michael Adler, a Government AIDS adviser, called it a "sad day."

The shock move came at the British Medical Association's annual meeting in Bristol after several doctors said they should know if patients were infected with the AIDS virus before carrying out operations.

To cheers they argued that medical and nursing staff should not be placed at risk. The vote — 183 to 140 — clearly dismayed BMA leaders, including the chairman, Dr. John Marks, who had argued against "draconian measures."

The doctors have decided that in future AIDS testing "should be at the discretion of the patient's doctor and should not necessarily require the consent of the patient."

The National Council for Civil Liberties said tests would provide only limited information about the spread of the AIDS virus. "But the limited nature of that does not outweigh the cost to an individual's privacy and the freedom to decide what happens to one's own body," said general secretary, Ms Sarah Spencer. She condemned the BMA decision as a "panic approach" by doctors: "No-one has yet been infected by caring for a patient."

The chief executive of the Terrence Higgins Trust, the biggest AIDS charity, said the BMA had gone against Government guidelines calling for an AIDS test to be coupled with proper counselling. "I don't mind if doctors carry out the test, but if they are saying they will do it without patients's consent, presumably they will not be telling patients beforehand," said Mr John Fitzpatrick. He claimed the doctors had voted through "sheer ignorance."

● Methodists yesterday called for an ecumenical response to AIDS at their conference in Portsmouth during which there were calls for compassion for those with the disease.

● Britain's doctors yesterday renewed their campaign against boxing, saying it should not be shown on television without a health warning because of the serious medical risk of the sport.  
— (PA)

Irish Times  
3<sup>rd</sup> July 1987

# AIDS storm as doctors vote for secret tests

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argued against "draconian measures."

The doctors have decided that in future AIDS testing "should be at the discretion of the patient's doctor and should not necessarily require the consent of the patient."

BMA leaders argued afterwards that this did not give the green light to widespread testing and warned that any doctor who did test patients without their knowledge might have to justify his action before the General Medical Council, the doctors' disciplinary body.

Patients might also be able to sue or even press charges of assault, they said.

The National Council for Civil Liberties said tests would provide only limited information about the spread of the AIDS virus.

"But the limited nature of that does not outweigh the cost to an individual's privacy and the freedom to decide what happens to one's own body," said general secretary Ms. Sarah Spencer.

She condemned the BMA decision as a "panic approach" by doctors.

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# Doctors face legal hitch over Aids test decision

By Jill Shearman and Thomson Prentice

A vote by doctors to back Aids testing without the patients' consent provoked a storm of criticism yesterday that could lead to government intervention.

The decision was reached at the British Medical Association's annual meeting against the advice of doctors' leaders, who issued a warning that doctors could be sued and might face disciplinary action from the General Medical Council.

The vote reverses the association's policy and apparently conflicts with government guidelines. The Department of Health and Social Security said last night that the issue would need to be examined and the legal aspects considered.

There was some question about whether testing without consent was lawful or could be classed as an assault, the department said.

The vote was denounced by

the Terence Higgins Trust, the leading Aids charity, and by the National Council for Civil Liberties which described it as "ignorant, arrogant and unjustified."

One Aids specialist said the decision could "drive underground those most at risk."

It was being widely seen as having been taken in the

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interests of doctors, for their own protection, rather than for the benefit of patients.

The conference, held in Bristol, approved by 183 votes to 140 a motion from Essex doctors that Aids testing "should be at the discretion of the patient's doctor and should not necessarily require the consent of the patient."

Guidelines issued by the Government's chief medical officer, Sir Donald Acheson,

say that doctors should discuss tests for Aids with patients before carrying them out.

A crucial aspect of testing is the impact that a positive result would have on a patient, implying that he or she was infected with a fatal and incurable disease.

Dr John Marks, the association's chairman, issued a warning last night that any doctor who tested without consent might have to justify the decision, and could be sued.

"The fears of the doctors are not an overwhelming reason for doing it", he said. A patient tested without consent would be free to sue the doctor and complain to the General Medical Council, he said.

The association would not expect any doctor to carry out such tests unless they could justify the decision to the

Continued on page 24, col 5

London

**The Times**

**3<sup>rd</sup> July 1987**

# Doctors decide on Aids tests without patients' consent

By Jill Sherman, Social Services Correspondent

Doctors will be able to carry out Aids tests on their patients without getting their consent, after a decision by the British Medical Association yesterday.

An anaesthetist argued at the association's annual meeting in Bristol that they had a right to protect themselves and their families as well as other health workers from exposing themselves to the infection.

The decision, which is likely to be opposed by Aids experts, came after a stormy debate.

Against their leaders' advice, the meeting finally approved the motion by 183 to 140 that testing for HIV antibodies should be at the discretion of the patient's doctor and not necessarily require the consent of the patient.

However the association's leaders later emphasized that the motion was not a licence for indiscriminate involuntary testing or screening.

Doctors who could not justify their reasons for testing the patient could be liable to disciplinary procedures, they said.

In spite of assurances from Dr John Marks, the association's council chairman, that only a few health workers had been affected by the virus during the course of their work, Dr Laurien Allan, an anaesthetist at Northwick Park Hospital, west London, said doctors had rights equal to patients'.

"I feel that my life and those

of my medical and nursing colleagues are more important than the future insurance or employment prospects of an infected individual", Dr Allan said.

Those involved in health care, resuscitation and the treatment of patients in operating theatres had a clear justification to require the Aids screening of patients.

"Doctors not only have the right to protect themselves and their families but also the health care personnel who will treat these patients and other patients who may subsequently use surgical or anaesthetic equipment on the same operating list", she said.

It was unacceptable to heap the responsibility of recognizing HIV carriers on doctors so they could place them last on the list.

"I urge you to vote for your rights as HIV negative individuals. You too have rights and those are no less than the patients'."

Other doctors argued that patients should not be alarmed unnecessarily about a disease if they were not infected.

Dr Tony Keable-Elliott, the association's treasurer, said that doctors carried out tests for syphilis and cancer without telling their patients.

"If you must never test for cancer without saying to patients that you might have cancer, I would say this was the grossest interference with the rights of doctors."

If patients came to him with

vague symptoms of a temperature it would be his duty to find out what was wrong but not his duty to say that the patient might have Aids and he would let him know in the next two or three days.

Doctors opposing the motion argued that patients with suspected HIV infection should not be treated any different from other patients and that consent should be obtained before any tests are carried out which could have adverse outcome.

"I am simply appalled that this motion is being debated", Dr B Bhattacharya, from Salford, Greater Manchester, said.

If the test was positive, what could the doctor do when there was no treatment and no vaccine, he asked.

On the other hand if the test was negative the patient might still be infected or infectious as HIV antibodies which are detected by the test might not have yet formed.

Failure to get consent from a patient before undertaking tests could create mistrust of doctors, avoidance of consultation for other purposes and concealment of behaviour from many patients at risk of HIV infection.

Although under present laws doctors cannot carry out tests against the patient's wishes, the new decision will enable hospital doctors to undertake a test for Aids while they are undergoing other types of blood tests.

Leading article, page 17



## TESTING TIME ON AIDS

Yesterday's vote by the British Medical Association — that doctors can carry out Aids tests without the consent of the patient involved — came after passionate debate and deep disagreement. Even those who favour doctors having this new power could not fail to be affected by the strong arguments which some of them used against their having it.

Patients should be tested only with their full consent, it was said, and only after full counselling as to the possible implications to themselves. Any move to test patients without their knowledge, or against their will, would lead to mistrust of doctors, and avoidance of consultation for other illnesses.

These are powerful arguments. On balance, they are outweighed by the threat which Aids carriers pose to doctors, nurses, hospital staff and other patients. The doctors and nurses are the people who are going to have to treat an Aids sufferer. If and when a cure is found for the disease, they are the people who are going to have to administer it. Action must be taken to ensure the least possible risk of the disease killing the very people on whom reliance is placed to defeat it.

"Taking blood without consent is an assault in law — and rightly so," was how one of the doctors who opposed the tests described them at yesterday's BMA meeting. He was putting it at its most emotive. In reality, the test for Aids would merely be one of the range of tests which patients routinely undergo when they enter hospital for many operations — or sometimes when they consult their doctor.

The tests would take place when a doctor suspected that a patient, seeking treatment for another reason, was showing possible Aids symptoms. Again, the breach of the important

principle of consent is outweighed by that doctor's duty to his colleagues, his family and to other patients.

It is reasonable to assume that tests will be carried out on people entering hospitals for treatment which involves loss of blood. This means that patients for surgery must expect to be tested. Eventually, it may be conclusively proved that Aids cannot be spread as easily as many at present fear. This is still not known. In the meantime, it is worth remembering that surgeons prick or cut their own fingers during operations almost as a matter of routine. Society cannot expect them to work in fear of such mishaps costing them their lives, even if that fear eventually proves illusory.

If Aids continues to spread, it may mean that pregnant women will also be tested as a matter of routine. It has long been the practice of many hospitals to test them without their consent, or at least their knowledge, for another sexually-contracted, contagious disease: syphilis. A delivery involves many hospital staff coming into contact with blood, not least the ancillary workers who must wash it away.

Other categories may include homosexuals, drug addicts, prostitutes, people who have recently travelled to tropical countries where Aids is endemic — and the spouses of all such categories. Identifying them will not always be easy. Deciding whom to test will involve doctors in decisions which are controversial socially — and even politically. Contrary to what some of the more strident lobbyists on their behalf maintain, Aids patients have on the whole received the sympathy and understanding of society as a whole. That should be extended to those who must treat them.

London Times  
3<sup>rd</sup> July 1987

## Sex test lifts LIG

There is only one thing the City likes better than a good story and that is a good story with sex in it. Shares in London International Group have already risen on the Aids scare but yesterday they soared 41p to 362p on news of a spectacular new source of profits.

LIG has the marketing rights for an as yet unnamed product in the final stages of its development which many believe will revolutionize women's lives.

Celltech, a privately owned biotechnology company, developed this product in a joint venture with Boots.

In a simple instantaneous test, it can measure an individual's hormonal balance. That will accurately fix the onset of ovulation with a three-day lead time — this is important because sperms can survive that long.

Product X was intended as an aid to infertility but its potential as a safe, accurate and uncomplicated contraceptive is enormous. Appar-

ently, even the Vatican has endorsed it.

The product is already in hospital use as an infertility aid but it may be at least a year before it is available over the counter.

Dr Peter Woods, pharmaceuticals analyst at Barclays de Zoete Wedd, the securities house, calculates that the contraceptive market is worth \$5 billion (£3.12 billion) a year and is growing fast.

He believes this product could generate worldwide sales of at least \$1 billion in the early 1990s. Taking an estimated 40 per cent profit margin, LIG and its fellow distributors could share annualized profits of \$200 million with Boots and Celltech splitting the rest.

On this basis, LIG's 1991-92 profits could double in that year alone to about £130 million. Not suprisingly, BZW is rating LIG a strong speculative buy.

# Choreographer's death highlights reluctance to admit to AIDS

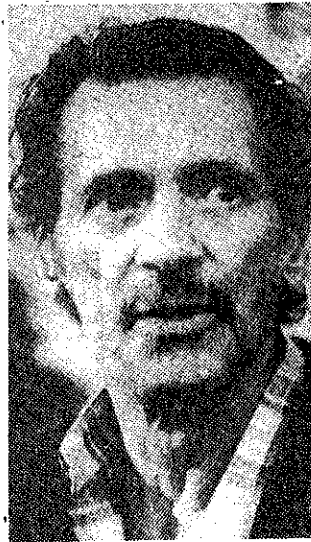
From Leonard Doyle, in New York

THE DEATH of Michael Bennett (44), one of America's leading theatre directors and choreographers, from AIDS is stirring a deep controversy over the way the disease is affecting the arts in this country.

For months it had been known on Broadway that Mr Bennett was battling the killer disease, although he had never acknowledged having anything more than heart trouble. But such is the cloud of uncertainty and the fear of stigma associated with the AIDS that the celebrated producer and creator of Broadway's longest-running show, "A Chorus Line", chose not to publicise the fact that he had contracted it.

It was only after his death in Tucson, Arizona, on Thursday that his lawyers stated it was in fact AIDS-related. Although the disease, normally associated with homosexuals and intravenous drug users, is cutting a swathe through all levels of the artistic community and is already depriving productions of their most creative talent, there is a deep-seated reluctance to discuss AIDS in the context of the arts.

"AIDS is not a disease that discriminates," five prominent dancers and choreographers stated recently. "It strikes down people in the business community, the arts, government —



Rock Hudson

every profession, every age group, every sexual persuasion."

But the fact that the deaths of people in the arts receive public attention has helped create the impression that the disease is more widespread there than elsewhere. A casual reading of the obituaries in such newspapers as the *New York Times* and the *Los Angeles Times* reveals the impact of AIDS in the creative arts and related fields like fashion and interior design. In the *Hollywood*

*Reporter*, up to 30 per cent of the obituaries now mention AIDS as the cause of death.

The New York City Opera has lost two of its more important directors, a wonderful baritone, dancers and two make-up artists," said the director, Ms Beverly Sills. "This is a plague."

Among those who have died are Paul Jacobs, a distinguished New York Philharmonic pianist, Evan Paris, a violinist, Robert Jacobson, the editor of *Opera News*, and nine members of the New York City Gay Men's Chorus. Also dead from the disease are entertainer and pianist, Liberace, and three screen actors, Rock Hudson, Seth Allen and Neil Flanagan. The recent death of Charles Ludlam, playwright, actor and founder of the Ridiculous Theatre Company, led to the cancellation of part of New York's Shakespeare festival in Central Park.

But according to Dr Richard Isay, of Cornell Medical College, a specialist in treating homosexuals: "There are no more homosexuals in the arts than elsewhere. Gay men may feel more comfortable in the arts... and so they are more visible there."

Still, one casting director said that AIDS "is horrifyingly spread in the community... easily say that over the past years, 150 performers known... are dead."

FEMALE-TO-FEMALE TRANSMISSION OF HIV

SIR.—A 24-year-old unmarried dancer, born in the Philippines, was tested for HIV infection upon entering a Mediterranean country. The test was reported positive on Nov 21, 1986, and she was required to return home. An anti-HIV test at a local hospital on Dec 28 was positive.

She consulted one of us (J. M. B. C.) on Feb 24, 1987. Her only symptoms were slightly reduced appetite and a non-productive cough. Particle agglutination, immunofluorescence, and western blot tests were positive for anti-HIV. The white cell count was  $6.65 \times 10^9/l$  (30% lymphocytes) and the  $T_4/T_8$  ratio was 0.62. Two stool examinations revealed only *Entamoeba coli* cysts. No cryptosporidia were observed. A tuberculin skin test gave a reading of  $50 \times 50$  mm induration and erythema at 48 h. Routine chest films showed slight right-upper-lung infiltrates interpreted as tuberculosis and the patient was given anti-tuberculosis therapy.

The patient was a female homosexual. Before 1981 she had had a regular female partner. While travelling and working in Mediterranean countries from 1981 to 1983, she had had sexual encounters with many women of different nationalities. Oro-genital contact was practised. In 1983, she returned to the Philippines where she re-established a steady relationship with her previous partner. She denied all heterosexual contact and intravenous drug abuse, and she had no history of blood transfusion.

The prevalence of antibody to HIV in the Philippines is very low. 44 seropositive sexually promiscuous women have been identified

among 40 000 females tested and only 3 cases of AIDS—all in males and all acquired outside the Philippines—have been recorded. No HIV seropositives have been found among the male homosexuals, blood donors, recipients of blood transfusion, and health care workers tested.

The most likely explanation of HIV infection in this case is female-to-female transmission.

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and Pathology,  
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OFELIA T. MONZON  
JOSE M. B. CAPELLAN

# Turnaround on AIDS

IRISH people are becoming more aware of the dangers of AIDS. And fewer people fear the consequence of meeting an AIDS victim.

A new Lansdowne Market Research/Sunday Press survey shows:

- 28 per cent fear meeting an AIDS victim compared with 48 per cent in January.

- 58 per cent say they would react sympathetically to an AIDS victim compared with 48 per cent in January.

- Infected needles are listed as a source of AIDS by 52 per cent of people compared with 40 per cent in January.

- 58 per cent say they would react sympathetically to the AIDS victim compared with 40 per cent in January.

- Casual sex is seen as a cause by 43 per cent compared with 23 per cent.

The January figures, in a Sunday World newspaper survey also conducted by Lansdowne, showed a great degree of fear about the disease. An education programme by the Government since then has turned this around. The campaign has had considerable impact.

## SPEND MORE MONEY

Two out of three Irish adults feel that more money should be spent by the Government "on AIDS education; one in four think too much was being spent. The majority came from multi-TV channel areas and were from the younger age groups covered by the 16-and-over survey.

Younger people were more inclined to answer that too little attention was being paid to condoms as a protection from AIDS.

Older people felt too much attention was being paid to condoms: the surveyors conclude "this issue seems to strike at the root of the divide between the more contemporary "attitudes" of young Ireland and those of their elders."

In January before the Government campaign, 51 per cent of those sampled thought condoms should be promoted as a protection against AIDS. The same chose 22 per cent of their respondents between the ages of 18 and 24, and 21 per cent between the ages of 25 and 34. Over fifty's accounted for 33 per cent and 23 per cent were between 35 and 49 years old.

## REACTION TO VICTIMS

SYMPATHY

58%

FEAR

28

SURPRISE

22

DISGUST

9

NO IDEA

11

And the 1,399 who were asked showed a willingness to answer: three per cent refused to reply compared with five per cent in January, indicating a more open attitude to the problem.

And only nine per cent said they would react with disgust to meeting an AIDS victim — the same proportion as January.

## NEEDLES, SEX BLAMED

Government posters identified that shared needles and casual sex carried the risk of AIDS. They worked. People asked about the main sources of AIDS blamed needles and casual sex to an even greater degree than they had in January, up from 40 to 52 per cent in the case of needles, and from 28 to 43 per cent in the case of casual sex.

Male homosexual intercourse was regarded as the main source of AIDS in January — in June when the survey was taken it was relegated to fifth in the list, down from 43 to 24 per cent.

The myths took a hammering. Only three per cent blamed saliva from cups, or the giving of blood. Two per cent suspected touching a victim or toilet seats as causes. One per cent listed saliva from kissing. All have been discounted as sources for AIDS.

Lansdowne concluded that these results give cause for concern about the precise understanding of AIDS sources. That means more advertising. Asked about sources of AIDS, nine per cent replied they didn't know. Women were found to stress transfusions as a source as they are more conscious of being hospitalised.

One third of the sample was over fifty years of age and older people were found to differ from younger people on the more-money-for-AIDS-education and use of condoms issues.

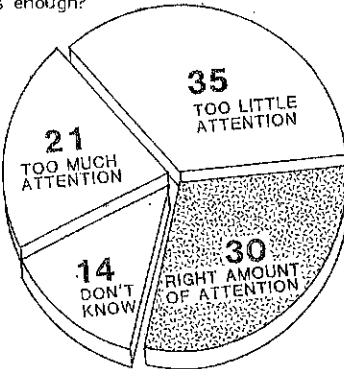
A total of 1,399 were questioned at fifty sampling points: 15 parts of Dublin, four of Cork and Limerick cities, 12 towns such as Tullamore and Dungarvan, of over 1,500 people, and 20 rural parts of the four provinces.

A spread of social classes were interviewed: 30 per cent from the upper and middle classes, 22 per cent from skilled working class background, and 19 per cent from a farming background.

Interviews were conducted face-to-face between the 19-20.

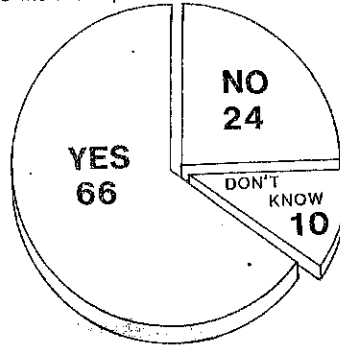
## CONDOMS AS PROTECTION

Did the Government campaign stress this enough?



## EDUCATION

Should more be spent?



# Ghost cleansing spreads AIDS...

THE traditional Zambian custom of 'cleansing', in which a widow must have sex with one of her dead husband's relatives, is coming under attack because of the risk of AIDS infection.

This widespread and deeply ingrained practice is supposed to rid the widow of the attentions of her husband's ghost, so that she is free for remarriage. But an increasing number of men are resisting social pressure to 'cleanse' an in-law, for fear her husband may have died of AIDS.

"It was like someone bringing you a coffin and saying you get in this coffin," said one man who fled from the countryside to the capital to escape his family obligations.

The Aids epidemic that has swept across Africa in the past five years has been exacerbated in Zambia by deeply entrenched tribal customs.

Those customs retain a strong hold on a large proportion of the country's seven million people, in part because of officials' unwillingness to publicly acknowledge the large number of

people who are infected with Aids.

That is the assessment of Zambian activists who say that the government intentionally fails to report all the Aids deaths.

Western observers in Zambia and international authorities on the fatal disease hold a similar view.

"People in Zambia do not officially die of Aids," said Emma Chibesakunda, chairman of the Catholic Women's League, an organisation attempting to publicise the disease and challenge tribal customs that may help spread it. "When my cousin died of Aids in March, we looked at his official death certificate and it said tuberculosis of the bones."

Ms Chibesakunda's willingness to speak openly about Aids is unusual in Zambia. The Ministry of Health imposed a gag order last month on all health workers, ordering them not to release information on the disease.

Zambia officially acknowledges about 300 cases and fewer than 100 deaths, figures that international health authorities say are absurdly low.

# Letters To The Editor

SEND YOUR LETTERS TO: LETTERS TO THE EDITOR, SUNDAY TRIBUNE, 8-11 BAGGOT STREET, DUBLIN 2.  
PLEASE INCLUDE TELEPHONE NUMBER FOR VERIFICATION

## David Norris: 'I deprecate evasion and half-truths'

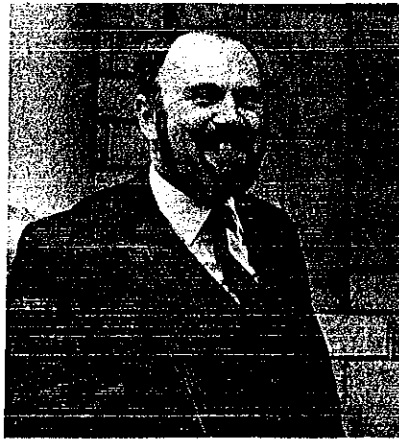
SIR — I write in reply to the attack upon me by John Patten, PRO of the Church of Ireland Youth Council (Letters, 21 June). While I welcome the belated breaking of silence by an official of the church on their covert policy of discrimination against stable gay relationships involving one or more of their employees, I must deprecate the tone of evasion and half truth that characterises Mr Patten's letter.

Two points are reiterated in the course of the letter, "sympathy for the unfortunate family involved", and the demand that people like myself "back off and get to grips with the real issue involved". I assume that their repetition indicates that these two points form the kernel of Mr Patten's argument.

Why is this nebulous "unfortunate family" dragged in to attract our sympathy? Was the curate not part of a family? Was his lover not equally so? Did they not together constitute some sort of family whose

rights were so grievously trampled upon by the church? I know only that the two men involved tried to contact me through a third party at the time — a matter I only became aware of after the tragedy had occurred. I remember also the subsequent witchhunt launched in certain dioceses of the Church of Ireland during which I was repeatedly called upon to console young aspirants to the cloth who had been subjected to a star chamber inquiry to the intimate details of their private lives.

Nor am I likely to forget that, bowing to similar appeals as Mr Patten's about the rights of "the family", I held my tongue after a friend of mine of nearly ten years standing was done to death and his killers let off with a reprimand, while his family announced in the media that he was not homosexual. He was in fact, as half Dublin knew even if his family didn't, but in what manner would the questions of his sexual orientation have justified his murder? I stayed silent then although I know



• DAVID NORRIS

the truth, in order to "spare the family's feelings". I now believe that I was wrong — that my duty was not to the family but to the next potential victim of thuggery and judicial indifference.

Mr Patten hopes that gay rights activists "will learn to respect the stand of the Church of Ireland in this regard (discrimination against gay couples) and address the real issue

involved". With regard to the first part of this proposal, it is quite unrealistic to expect gay people to take such a craven attitude of acceptance of prejudice. The choice is between self respect and masochism. I am happy however to respond to the second clause, and "address the real issue".

The real issue is that the Christian churches are the clear historical source of the legal and social discrimination practised against gay people for many centuries, varying in severity from mass murder under the inquisition in medieval, and Nazi genocide in modern times, to continuing discrimination in housing and employment. Until the Christian churches examine the Biblical origin of their prejudice, subjecting scrutiny and comparative analysis and their own consciences and record in this matter, and acknowledge their guilt, it will be impossible to advance with honesty.

Intellectual honesty is not

Mr Patten's strong suit. "The fact that the relationship is heterosexual or homosexual is in a sense irrelevant because the church will only contemplate relationships within matrimony." Whether a relationship is heterosexual or homosexual is precisely the point because the church precludes any legitimate physical expression of homosexual love. If heterosexual people cannot survive without some institutionalised method of expression for their physical attraction, how can it be realistic to attempt to impose involuntary lifelong celibacy upon gay people?

At the end of the letter Mr Patten asks: "Can this issue be closed once and for all?" The answer is not yet. It would be quite intolerable to allow emotional blackmail to slam the door on unresolved injustice. The solution lies in the hands of the church. It goes under a variety of names — truth, human rights, justice.

Senator David Norris,  
Seanad Éireann,  
Baile Átha Cliath.

5 ✓