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21st to 26th August 1987

A PLAY ON AIDS 'The Normal Heart' which opened at Dublin's Project Arts Centre on Thursday drew a strong emotional response from the audience. MAIRE CROWE talked to the director, Michael Scott.

Breaking through the wall of silence around AIDS

SOMETIMES IT IS necessary to state the obvious; and so Michael Scott, director of 'The Normal Heart', a play which opened at the Project Arts Centre in Dublin on Thursday says: "There's more to theatre than smiles, tap-dancing and glitz."

'The Normal Heart' was written by Larry Kramer in 1985 and treats of the silence in New York about the AIDS epidemic and the efforts of one man to break that sound barrier and come to terms on a personal and public level, with the horror of the illness.

There is no tap-dancing in 'The Normal Heart', there is no glitz. But there are smiles aplenty and humour in what is, in fact, the true story of Larry Kramer's efforts in New York's Gay Men's Health Crisis group to breach the extraordinary indifference of the city's officialdom to the devastation of AIDS.

People in crisis are at the centre of this drama that took New York by storm, and last year took London by storm when Ned, the central character was played by actor Martin Sheen.

"No treatment has proved effective and a cure is yet a dream," wrote a member of the G.M.H.C. when 'The Normal Heart' was first staged in the United States two years ago. In that country, little has changed in official attitudes to AIDS.

For the characters in the play a resolution to their suffering comes, says director Michael Scott: "in their attempts to communicate with each other and in their battle to end the cancer."

His determination, and that of Myra Geraghty, his co-director in The Machine theatre company to bring the play to Dublin was not without impediment. And while private sponsors have put up £5,000 to the costs of staging it here, other would-be sponsors would have nothing to do with "an AIDS play." One beer importer ran a mile when approached.

This play is written from the battlefield; it deals with the battle against life. And it's one of the few occasions where not only is there good drama, but where there is a chance to make vibrations within one's own society. It's an opportunity not to be missed.



Michael Scott

Michael Scott and his cast of nine actors — one of whom, Anthony Newfield, has been brought over from the United States — have not set out to shock audiences. Rather, says the director, he hopes that the play will help "people to learn to have compassion for those who

contract AIDS, some of whom end up looking like victims from Auschwitz."

Indeed, the aspect of the production that is most shocking is not in the original body of the play, but in graphic slides that Michael Scott has added to show the physical effects of AIDS.

Though it has contributed no money to the venture RTE Radio 2 is listed as a co-sponsor of 'The Normal Heart', and has agreed, Michael Scott says, to present a series of five phone-in programmes of advice and comment during the late-night Mark Cagney slot during the play's run.

This information service fits in well with Scott's hopes for 'The Normal Heart' that it would contribute in some way to communication about and compassion for victims of the illness.

It comes at a time, too, when, he notes, "the Health Education Bureau produced a far more concerted response to AIDS here than in any other country. But that has all stopped now because there is no money. Somebody isn't providing the AIDS with funds to carry on that work."

Black on white banners around the small Project Arts Centre tell their own story about AIDS. One

Anthony Newfield and Conor Mullen in 'The Normal Heart' at the Project Arts Centre.

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Paudge Behan, son of the writer Brendan, who appears in 'The Normal Heart'

rears: "You cannot get AIDS from hugging, socialising, telephoning, kissing, cups, glasses, door knobs, mega stores, masturbation, body massage, photo centers, or any nonsexual body."

Michael Scott believes that "The disease will not become a reality until every one of us knows someone who has died from AIDS. Lots still don't, but give it time, and they will."

In between the time he spends on a punishing schedule as progress director of the Dublin Theatre Festival, Scott finds time to state play off at which have one thing in common: "I tend," he says, "to do plays about people looking for love, and finding within alienated world."

In real life the letters A.I.D.S. still spell alienation. And the normal heart still suffers in silence.

Irish Times
22nd August 1987

AIDS test for bishop

BISHOP Sebastian Kolowa, head of the Lutheran Church in Tanzania, was forced to take a West German test for AIDS before he could renew his residence permit in Munich.

The Bavarian State Government adopted stiff measures in February in an attempt to combat Acquired Immune Deficiency Syndrome.

Bishop Kolowa arrived in Munich last autumn with his wife for a year's stay for theological studies.

A spokesman for the Bavarian Interior Minister refused to confirm the report, noting only that all foreigners seeking a residence permit in Bavaria must undergo an AIDS test. — (AFP)

SUNDAY INDEPENDENT, AUGUST 23, 1987

The politics of AIDS

JUST before the second half of *The Normal Heart* at the Project on Thursday night a man in the row in front of us handed a leaflet to the bloke beside me outlining the failure of the Irish Department of Health to respond adequately to the needs of the gay community threatened by AIDS.

It was a useful reminder that what was happening on stage is also happening here, that a play about AIDS in Ireland would take much the same shape.

"*The Normal Heart*" is essentially a documentary play about AIDS in New York between July 1981 and May 1984. It is a play about private grief and public inertia.

The main protagonists are a group of gay men who set about raising funds and consciousness to prevent the spread of AIDS among homosexuals in the city.

For most of the play no one knows what the disease is. It is clear it is contagious, but unclear to

Theatre: Colm Toibin on 'The Normal Heart'

what extent. The cast is frightened not just by the disease, but by the realisation that, because it seems to affect mainly gay men, no one is going to do anything about it.

They are going to be let die one by one, without any public money being spent on information or research.

That they are a pretty rum bunch is what makes the play, for the most part, extremely enjoyable.

Ned (Anthony Newfield) is loud and paranoid; his search is not just for justice but for love, and he finds Felix (Joseph Taylor) who is a real nice guy.

Ned's anger is too much for the others, who don't want him to run the campaign. This task is given to Bruce, (B. J. Hogg) who is also gay as

well as being a vice-president of a bank.

The other activists include Derek Chapman as Mickey, constantly in danger of losing his job as the campaign progresses and full of views about sexual liberation and the gay man, as well as Jonathan Sharpe as Tommy who plays the part of a Southern belle, but is also a real nice guy.

As the scale of the crisis becomes apparent, those men start to discuss and deliberate on the politics of their situation.

The vice-president of the bank can't go on television to talk about Aids; Ned can't rid himself of guilt; they wonder if gay liberation is about the availability of sex and nothing else. All around them their friends are dying.

A doctor in a wheelchair (Gabrielle Reidy) is the only one who understands the seriousness of AIDS. Her efforts to get something done are in vain.

Felix discovers a purple blotch on his foot; just as two of the men in the doctor's waiting room have been diagnosed as having AIDS earlier in the play, he too is told he is dying.

There are problems with the production, particularly in the first half, but also with the writing. But in a way, this doesn't matter.

The play is an attempt to alert us to what happened in America to show that the slowness of the authorities in doing something about AIDS was due to a prejudice against gay men, a matter which an Irish audience will no doubt understand.

It is also a powerful documentary, full of humour, melodrama and interesting characters.

Sunday Tribune
23rd August 1987

Radiators for Aids gig

TOP punk group of the Seventies the Radiators from Space are to perform for an Aids benefit concert in Dublin in September. The concert, which is being organised by the Gay Health Action group in association with the Aid to fight Aids campaign will be held in the Hawkins, in Dublin on 13 September.

"We'd been talking to Phil Chevron in London about doing something, and

then he suggested that the Radiators might reform for one concert," said Mick Quinlan of GHA.

"It's the only time that Chevron is free from the Pogues, so we decided to go ahead with the concert then," he added. The last time the Radiators performed together was in 1980, but they were one of the most promising bands to emerge during the punk craze.

AIDS VACCINE:

First human tests in U.S. approved

The Food & Drug Administration last week took its first step on the uncertain road to AIDS prevention by approving the first human testing in the U.S. of a potential vaccine against acquired immune deficiency syndrome.

The testing, which is expected to begin by October, will involve vaccinating 81 healthy volunteers with a purified envelope protein of human immunodeficiency virus (HIV), the retrovirus that causes AIDS. The first phase of testing, expected to last six months, is designed to assess the vaccine's safety and ability to produce an immune response, and to determine proper dosage. Later tests will address the crucial question of whether the vaccine can protect people from HIV infection.

Even if the vaccine passes these tests with flying colors, "it will be a considerable time, probably the mid-1990s," before this vaccine, or any vaccine, will be ready for general use, cautions Anthony S. Fauci, director of the National Institute of Allergy & Infectious Diseases (NIAID), which is sponsoring the trial.

Most of the volunteers for the initial vaccine tests will be homosexual men, the high-risk group that has been struck hardest by AIDS. NIAID scientists will select 75 healthy male homosexuals who test negative for HIV antibodies and who agree to observe safe sexual practices. As of mid-week, more than 80 men had already volunteered for the trial, according to an institute spokeswoman.

The first phase of testing will be conducted at the National Institutes of Health clinical center in Bethes-



Lane (left) and Fauci discuss AIDS test results

da, Md., under the direction of Fauci's colleague, H. Clifford Lane. If this phase is successful, researchers will assess the vaccine's safety on 100 to 200 volunteers in a year-long second-phase trial. In a third phase of testing, the vaccine's effectiveness against AIDS will be studied in thousands of volunteers who are at high risk of becoming infected.

The vaccine's active ingredient is a 160,000-dalton glycoprotein from HIV called gp160. In the life cycle of the AIDS virus, gp160 is the precursor protein that splits into the virus's envelope protein, gp120, and a transmembrane protein called gp41. A modified gp160 was used because it elicits a better immune response than does gp120, the more obvious choice.

The vaccine was manufactured and tested through a joint effort of NIAID and MicroGeneSys Inc., a small biopharmaceutical firm in West Haven, Conn. NIAID researchers constructed an infectious mo-

lecular clone of HIV from two HIV isolates. This clone was given to MicroGeneSys scientists, who isolated the gene for gp160 from it. After modifying this gene, the firm's scientists inserted it into the genome of a baculovirus, a virus that infects such insects as moths and butterflies. The recombinant baculovirus was added to insect cells in culture. These cells, when infected by the virus, expressed the foreign gene—that is, they produced the modified gp160 protein.

When the vaccine was tested in animals, the results were "highly encouraging," NIAID scientists say. The

vaccine produced high levels of neutralizing antibodies to HIV, especially in guinea pigs. And no serious adverse effects were seen, even at doses much higher than would be given to humans. But because animals don't come down with AIDS, there's no way short of human tests to determine whether the vaccine can protect against the disease.

Scientists hope that the immune systems of vaccinated individuals will mistake gp160 for the complete AIDS virus and produce antibodies to attack the virus. The idea is to set up a biological defensive shield against HIV before a person is actually exposed to the virus. Although the immune system produces antibodies in response to HIV, they don't always keep infected people from coming down with the fatal disease. Whether vaccine-induced antibodies are any more protective against AIDS won't be known for some time.

In addition to antibodies, researchers also hope to see the so-called

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cell-mediated immune response, in which "killer cells" are induced to seek out and destroy the AIDS virus. This response was seen when the vaccine was tested in chimpanzees.

Fauci stresses that volunteers who take the vaccine cannot get AIDS from it because it doesn't contain potentially infectious viral RNA or complete virus particles. "We expect no adverse effects beyond those that sometimes occur from other immunizations, such as some redness and soreness at the site of injection," he says.

If the vaccine does induce antibodies, as expected, vaccinated individuals will test positive on the tests now used to signal exposure to the AIDS virus.

Several other candidate vaccines are awaiting FDA's go-ahead to begin testing in humans. Some of these candidates use either outer-coat or inner-coat proteins from the AIDS virus. Others are based on a non-pathogenic virus called the vaccinia virus that has been engineered to express specific HIV proteins.

A recombinant vaccinia-based vaccine recently made headlines when Daniel Zagury of Pierre & Marie Curie University in Paris injected himself and a dozen other volunteers in Zaire with it. Tests showed his vaccine is safe and produces an immune response. But the results have not been promising enough to warrant larger-scale trials. □

N.Y. county may ban plastic wrap for food

New York's Suffolk County on the eastern end of Long Island is considering a ban on plastic packaging for food.

A bill now before the Suffolk County legislature would prohibit retail establishments in the county from selling anything that is not packaged in biodegradable material. The bill sponsored by Steven Engelbright (D.-East Setauket) already has the support of 11 other legislators. The bill requires 10 votes to win approval. The legislature can vote on the bill as early as Sept. 8.

A principal target of the bill is the polystyrene "clam shell" pack-

ages used by many fast food restaurants to hold hamburgers, chicken, and other fast foods. The ban would exclude certain packaging uses such as for raw meat, vegetables, and pharmaceuticals.

According to the Society of the Plastics Industry, polystyrene packaging—including "clam shell" packaging as well as cups, plates, and other items—is the largest single end-use category for polystyrene. It accounts for more than 25%, or 1.1 billion lb last year, of all polystyrene used in the U.S. According to the latest available figures, polystyrene used in packaging was up 29% to 541 million lb for the first five months of 1987.

Many other localities likely are watching the Suffolk County bill. The county has become a trendsetter in other types of environmental legislation, such as smoking restrictions, bottle return laws, and phosphate detergent bans.

Like many other localities, Suffolk County is running out of landfill space and is attempting to find solutions to its solid waste disposal problems. The Suffolk County town of Islip made national news recently as a barge containing garbage from the town made a trip up and down the East Coast looking for an appropriate landfill site.

Ken Lane, assistant director for state government affairs for SPI, says that Berkeley, Calif., also has proposed a measure similar to the one under discussion in Suffolk County. "We're traditionally opposed to that type of measure," says Lane, who adds that food packaging is only a small part of the entire waste stream. "Suffolk's ban won't do anything to solve the landfill crisis." He suggests a total solid waste management program for the county that would include recycling where it is economically viable, incineration, and composting. □

NAS warns against rigid biotechnology controls

The National Academy of Sciences has issued a rare "white paper" on the regulation of biotechnology products, saying that rigid and strict controls on all such products are not justified. The report calls for a regulatory classification system that would reflect potential risk based on the type of organism and its intended use.

"Biotechnology is a key technology in America's future," commented Frank Press, NAS president, on release of the report. But with respect to recombinant DNA organisms, "a wide range of viewpoints has been presented both in scientific publications and in the mass media." Because of this, NAS set up a committee of biologists with a broad range of experience in biotechnology to explain the scientific position on release of genetically engineered organisms into the environment.

NAS issued the report two and a half weeks earlier than planned in response to controversy surrounding the unauthorized release of genetically altered bacteria into the environment by a Montana scientist (see following story).

Chaired by Arthur Kelman, head

of the department of plant pathology at the University of Wisconsin, Madison, the committee spent several months interviewing ecologists, molecular biologists, geneticists, and applied biologists on the environmental release issue. The main conclusion is that "there is no evidence that unique hazards exist either in



Press: a key technology

AIDS Vaccine Is Being Slated for Tests

An experimental vaccine for acquired immune deficiency syndrome has gained Federal approval for human tests — the first such vaccine to be so approved in the US.

Dr. Robert E. Windom, assistant secretary for Health & Human Services, said last week that Food & Drug Administration had issued a go-ahead, and that National Institute of Allergy and Infectious Diseases is beginning its tests in volunteers.

Developed by MicroGeneSys, Inc., a biopharmaceutical firm in West Haven, Conn., the vaccine is made of protein derived from the genetic material of the human immunodeficiency virus (HIV).

HIV attacks and destroys a particular group of cells in the immune system, thus permitting normally treatable infections to result in debilitating and life-threatening illnesses. More than 40,000 people in the US have

been diagnosed as having AIDS since 1981, and nearly 60 percent of them have died. It is estimated, however, that more than 1 million people in the US are infected.

"Preventing the spread of infection with HIV in the United States and around the world is of paramount importance," Dr. Windom said in heralding the clinical study. "Although education is a powerful public health tool for limiting transmission of AIDS, in order to halt the global AIDS epidemic we must have an effective vaccine."

Dr. Anthony S. Fauci, director of NIAID, said that the study will be carried out at the clinical center National Institute of Health, Bethesda, Md., by Dr. H. Clifford Lane, deputy clinical director and a senior investigator in NIAID's laboratory of immunoregulation.

The researchers will study the vaccine in 75 healthy,

HIV-antibody negative homosexual males whose current and recent sexual behavior may be regarded as "low-risk." Dr. Fauci explained that the volunteers must have had no possible exposure to HIV during the previous three months and they must agree to observe "safe sexual practices" while participating in the study.

FDA commissioner Frank E. Young said that he was pleased that the study was starting. "This is the first vaccine to reach the stage where we can approve it for studies in humans, and we are optimistic about this approach." He warned, however, that "the public should realize that this is a first step — and many steps are still to be carried out before we have a vaccine, whether it is this one or another, that is safe and

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AIDS Vaccine

Continued from Page 3

effective enough for general use."

Dr. Fauci emphasized that the study is designed to assess the vaccine's safety and ability to produce an immune response, and to determine proper dosage.

"The vaccine consists of purified protein from HIV and not the virus itself," Dr. Fauci stressed. "Therefore, no one can get AIDS from the vaccine, and we expect no adverse effects beyond those that sometimes occur from other immunizations, such as some redness and soreness at the site of the injection."

"At this stage," Dr. Fauci pointed out, "we are not attempting to determine whether the vaccine can actually protect people from HIV infection."

He continues, "If we obtain good results from this study, we will expand our research. At this point, of course, it is too early to predict whether this vaccine will undergo wide-spread efficacy trials, but we are quite hopeful."

"This study is a natural outgrowth of the overall goal of NIAID's laboratory of immunoregulation, which is to understand the immunopathogenesis of AIDS," Dr. Fauci added. "NIAID scientists have been working closely with scientists at MicroGeneSys in

developing the product and in assessing the results of animal studies using the vaccine."

Dr. Malcolm A. Martin, chief of the laboratory of molecular microbiology for NIAID, furnished the company with an HIV clone that he and his colleagues constructed from a North American HIV isolate, NY5, and a European isolate, LAV.

The vaccine was developed using techniques similar to those employed in the manufacture of other, "recombinant" vaccines.

To make the vaccine, MicroGeneSys inserted the modified gene for the entire HIV envelope precursor protein, gp160, into the genome of a baculovirus — one that infects such insects as moths and butterflies. The recombinant virus is then grown in an insect cell tissue culture system, which produces the gp160.

Scientists from Oncogen, a division of Bristol-Meyers Co., and George Washington University, have also applied for permission to begin human testing of their proprietary AIDS vaccines.

Chemical Marketing Reporter

VOLUME 232
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AUGUST 24, 1987

Garda heard his biter had AIDS

A YOUNG garda broke down in tears in the witness box in the High Court yesterday as he remembered watching a television programme and hearing that a prisoner who had bitten him on the ear was an AIDS carrier.

Later the garda was to learn that medical tests showed he had a hepatitis condition.

The President of the High Court, Mr. Justice Hamilton, made an interim award of £75,000 under the Garda Síochána Acts to the garda and adjourned the matter for "further consideration" in three years.

The garda said that in February, 1985, he arrested a man who bit him on the left ear.

"He began to shake his head like a mad dog with my ear between his teeth. The driver of the patrol car started pulling the prisoner by the legs, and I managed to prise open his jaws to release my ear," he said.

The prisoner was a well-known hepatitis carrier and the garda said he got an injection of hepatitis vaccine.

Some months later, said the garda, he was in his parents' home watching a television programme about AIDS carriers and a woman on the programme said she was the mother of the prisoner who had bitten his ear and that her son was an AIDS carrier.

"I was shocked," said the garda, who went for blood tests and one showed his blood count was not normal and he was then sent to Professor John F. Fielding at Jervis Street Hospital.

He was told his liver was damaged. He was monitored for AIDS antibodies and this monitoring had gone on until recently and had proved negative.

However, when hepatitis was discovered, he was told to "back off" any relationship with the opposite sex while undergoing tests and the medical people had worn protective clothing.

He had lived a normal life before the incident but was now very concerned about the future.

He hoped it would not progress and get worse. The disease did fluctuate and his blood counts went up and down. Sometimes he lost weight, as much as 1½ stones.

He had been told that if he wanted insurance he would be "loaded" like some car drivers. He was hoping to buy a house within the next year but had not got a mortgage yet.

Professor Fielding said the garda suffered from a form of viral hepatitis which did not usually progress to cirrhosis. The best the garda could hope for in the future was that he could continue to have chronic persistent hepatitis.

He would remain relatively well rather than unwell. At that level they advised people to abstain from alcohol. The other level was that the disease could progress to cirrhosis and then, depending on his life style, he could continue for another ten to fifteen years. The garda would have to be monitored for another two to three years.

Mr. Hugh O'Flaherty SC (instructed by Noel G. Hughes and Co.) said the possibility was that the disease was like a time bomb ticking away in the background.

Mr. Justice Hamilton said this was a potentially explosive problem. It must, however, be of great relief to the garda that he was not suffering from AIDS antibodies.

There was a real possibility the condition might progress within the next two years from being benign to being active which could lead to cirrhosis and if this occurred he would have a working life of about ten to fifteen years.

It was a case, said Mr. Justice Hamilton, where he should make an interim award and the Minister for Finance had consented.

Based on the fact that the garda's quality of life had been affected, the condition he was suffering, the mental trauma he was presently undergoing and the risks inherent in his condition, he would make an interim award of £75,000 and adjourn the matter for three years.

Evening Herald
24th August 1987

AIDS...now we know

THE media are putting so much emphasis on Aids it is becoming more of an embarrassment than the education it should be.

Scarcely a day will pass without a reference to Aids in some newspapers.

The regular chat shows, on television, scrutinise the issue at every opportunity. Then we have fairly explicit sex advertising pertaining to Aids.

By now the majority are fully aware of Aids

and understand the factual elements of the above. Why then are the established facts re-emphasised so consistently in public?

PATRICK C. HENNESSY
Dun Laoghaire.

Chimps not protected by AIDS vaccine

AN EXPERIMENTAL AIDS vaccine given to six chimpanzees in the United States prompted the animals to develop antibodies to the virus but failed to protect them from infection.

It did not unfortunately, protect the animals against infection," said Harold McClure, chief of pathology and immunology at Emory University's Yerkes Primate Centre in Atlanta.

"And that's got to be the bottom line as far as what we're looking for is concerned: A vaccine for this disease."

McClure questioned a decision by Federal officials to begin human tests of experimental AIDS vaccines before the preparations had been thoroughly tested with chimpanzees, the only animals other than humans that have been successfully infected with the human AIDS virus.

"I don't understand why we need to rush into humans with a vaccine that either does not work with chimps or has not been tested with chimps", he said. "To justify vaccinating humans, we should have information that that vaccine is likely going to be protective."

The U.S. Food and Drugs Administration last week approved the first candidate vaccine for human experiments, which are expected to begin this Autumn.

The stated purpose of the tests is to determine if candidate vaccines stimulate the

production of antibodies to the disease in humans

But McClure said the significant question is whether these are the type of antibodies that produce immunity to the disease.

Scientists from Yerkes, the centre for disease control, the Southwest Foundation for Biomedical Research in San Antonio and Oncogen, a Seattle-based biotechnology company, described their experiments in a paper published this week in the British scientific journal, *Nature*.

It is the first scientific account of an effort to immunise chimpanzees to the human immunodeficiency virus (HIV), which causes AIDS.

The six vaccinated chimps were injected with the potential vaccine — a genetically engineered form of vaccinia virus containing a section of genetic material from the AIDS virus.

Two weeks after receiving the vaccinations, the chimpanzees were given "booster" vaccinations of the same substance.

After and additional two weeks, tests showed all had low concentrations of antibodies to HIV, the researchers said.

Evening Press
24th August 1987

Euthanasia 'threat' to AIDS victims

The legalisation of voluntary euthanasia could lead to a form of war between AIDS victims and the rest of society, a former president of the British Medical Association said today.

Sir John Peel, who was the Queen's obstetrician, is one of the signatories of a report by Family and Youth Concern to the BMA working party considering euthanasia. It said AIDS sufferers would be the first to suffer from pressures for voluntary euthanasia.

The disease isolated its victims, its treatment was expensive and society was likely to become increasingly intolerant of patients as antagonism towards high-risk communities, homosexuals and drug abusers increased.

Those at risk would cease to approach the medical profession, feeling unwanted and unloved.

"It would not be surprising if this led to irresponsible behaviour upon the part of sufferers resulting in the deliberate infection of others," said Sir John and the other signatories, Mr. Ambrose King a leading venereologist until his retirement, Dr. Stanley Ellison, chairman, and Mrs. Valerie Riches, secretary of Family and Youth Concern.

Euthanasia could also have serious implications for family attitudes. "People who are ill or very elderly can appear difficult or cantankerous. Inheritance and a wish to be free of responsibility would undoubtedly influence some relatives to persuade the individual to choose euthanasia."

Evening Press
25th August 1987

AIDS robber is caught in US

NEW YORK'S most wanted bank robber, who held up 31 Manhattan banks by presenting cashiers with notes saying he was "dying of AIDS and had nothing to lose", has been arrested during another robbery.

Cyril Hodge (39), walked into a Citibank branch on Madison Avenue just before noon yesterday. He approached a cashier and said he had AIDS and would not hesitate to shoot unless the cashier handed over some money.

While walking out of the bank, with \$500 to \$600, he was jumped on by the bank manager and the manager's assistant, who held him until the police arrived.

Hodge, who offered little resistance, "was the most prolific robber, and had the longest pattern that that we've ever had here," said Capt. Patrick Harnett of the Police Department's major case squad. Of the 32 bank robberies, 11 were unsuccessful.

Harnett said Hodge had netted about \$26,000 in midtown and lower Manhattan, and that investigators had been searching for him since February 20.

In most of the robberies, Hodge would hand in a note which read: "I'm dying of AIDS. I've got nothing to lose." In some cases he would threaten to shoot the cashier. In at least six robberies, Harnett said, Hodge displayed a fake gun which he had on him when arrested.

Hodge appeared not to be camera shy. His picture was recorded by security cameras in many of the banks he robbed, and except for sunglasses and a hat, he did not attempt to disguise himself.

The police said that Hodge had a previous conviction for a bank robbery in 1873 in which a bank guard was shot and wounded. He served five years of a 15-year sentence.

Police said Hodges told them after his arrest that he was spending \$200 a day on injecting himself with drugs. His blood will be tested to see if it contained the AIDS virus.

Hodge was charged with "several counts of robbery in the first degree", police said but they have not yet determined how many counts that will be.

Protecting Volunteers In AIDS Vaccine Test

By LAWRENCE K. ALTMAN, M.D.

INJECTIONS of the first experimental human AIDS vaccine in the United States this fall will be accompanied by what Federal health officials call "unprecedented" steps to protect the volunteers from possible discrimination.

The experiment is to test the vaccine's safety and whether it produces antibodies, studies to test whether these antibodies can protect against AIDS would follow if these early experiments prove successful.

If the experimental vaccine does result in the production of antibodies, recipients will thereafter test positive on blood tests for AIDS virus infection, which detect antibodies rather than the virus itself. This means that blood banks or others carrying out AIDS screening could mistakenly identify the volunteers as virus carriers.

To prevent this from happening, each volunteer will receive a notarized document saying that he has developed AIDS virus antibodies as a result of a vaccine trial.

All but three of the 81 volunteers in the study at the National Institutes of Health in Bethesda, Md., will be homosexual men who are not infected with the AIDS virus. In this country, AIDS has chiefly struck homosexual men, and studies have shown significant differences in tests of immune system function between homosexual and heterosexual men who do not have AIDS.

The documents the volunteers will receive are intended to protect them from possibly losing, or being denied, jobs, health and life insurance, and housing if someday they have to take AIDS blood tests.

In anticipation of the day when there is a standard AIDS vaccine, widely distributed, Federal researchers have begun working with officials at the Bureau of Engraving and Printing to develop counterfeit-proof identification cards so that those vaccinated could prove that the results of future blood tests reflected the immunization, not natural infection with the AIDS virus. Dr. Anthony S. Fauci, who directs the National Institute of

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Protecting Volunteers In AIDS Vaccine Test

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Allergy and Infectious Diseases, said in an interview.

Those vaccinated might subsequently become genuinely infected if they engaged in risky behavior, but scientists believe an advanced test will enable them to distinguish the antibody pattern of a true infection from one resulting from the vaccine.

Such distinctions can be detected by a laboratory test known as the Western blot that can detect the specific proteins of the antibodies formed when a virus or other foreign substance enters humans. For example, the AIDS vaccine to be tested this fall, manufactured by Microgenesys Inc. of West Haven, Conn., is made from a protein called gp 160, a fragment in the outer coat of the AIDS virus. Gp stands for glycoprotein (sugar-protein); the 160 is a shortened version of the molecular weight of 160,000.

The Western blot of someone infected with the experimental AIDS vaccine is expected to detect only antibodies to the gp 160 protein and to its breakdown products, gp 120 and gp 41. The Western blot of someone naturally infected typically includes not only these but antibodies to other viral proteins as well, such as p 55, p 24 and p 17.

Before volunteers are chosen for the experiment, candidates will be given physical and psychological tests to determine their general good health and emotional stability. They will be told about the risks of the experiment before they consent to participating.

The volunteers must also pass an oral quiz to demonstrate knowledge about the risks of infection with the AIDS virus through sexual intercourse and on how to prevent it, as well as about the risks of the experiment. Although many researchers informally ask potential volunteers about their understanding of an experiment's risks, the AIDS vaccine experiment is one of the rare times, if not the first, that such quizzes have been required.

The quiz was demanded by the ethics committee whose approval is needed for federally financed experiments on people, according to a committee member, Elaine Baldwin, who is a public information officer at the National Institutes of Health. The committee wanted assurance that the volunteers understood exactly what they were getting into, she said.

Ms. Baldwin said the ethics committee did not address the question of who should be the first subjects in the AIDS vaccine experiments. Despite the rich tradition of scientists trying new vaccines on themselves first and although Dr. Daniel Zagury, a French immunologist, gave himself an experimental AIDS vaccine that he also tested on people in Zaire, the N.I.H. scientists conducting the AIDS vaccine experiments have decided against this.

Dr. Fauci said in an interview that the decision against self-experimentation was not because of any unwillingness on the researchers' part to share the risks they are asking other people to take. Rather, he said they ruled it out in the belief that scientists conducting a human experiment, and thus emotionally involved, could not be objective in giving informed consent on themselves. He cited another reason: some of the researchers might feel pressure from superiors and others to agree to be vaccinated.

To recruit potential volunteers, Dr. H. Clifford Lane, an N.I.H. immunologist who is the principal investigator for the AIDS vaccine experiments, began sending letters to about 100 physicians in the Washington area several weeks ago. The National Institutes are also relying on publicity from the announcement of the experiments.

Any healthy homosexual man who is not infected with the AIDS virus and who takes precautions to avoid its spread in sexual encounters is eligible to participate, but residents of the Washington area are preferred because the volunteers must pay their transportation to N.I.H. for initial screening visits and for frequent periodic check-ups after the injections. (Potential volunteers should call Margaret Megill at 301-496-7196.)

N.I.H. officials declined yesterday to say how many people had expressed interest in participating, but the officials said they believed they could recruit enough candidates and, among them, enough people who meet the criteria for the study.

As part of a prospective volunteer's first visit, the N.I.H. staff will take blood samples to detect evidence of the AIDS virus by three methods: the Western blot, the widely used Elisa test, and a laboratory culture to isolate the virus if it is present.

Results will be given at the second visit, one month after the first. If on that second visit the individual is still interested in participating, the tests will be repeated, to doublecheck that the individual is free of infection. The potential volunteer will be counseled about the experiment and its risks as well as about safer sex practices. Their knowledge about these points will then be tested.

The first 81 eligible volunteers who pass the quiz will be enrolled in the experiment. Sixty will receive the

Steps are being taken to guard the volunteers from discrimination if later tests falsely suggest virus infection.

vaccine being tested, but in a range of different doses so as to determine the safest and most effective. The researchers will administer the vaccine in increasingly larger doses if no untoward reactions are noted along the way.

For instance, 15 people will test a dose of 10 micrograms; then five of these 15 individuals will get another 10-microgram dose as a booster; five others will get 50 micrograms; more and the remaining five will get no further vaccine. In the same way, increasingly higher doses will be given to three other groups of 15 people.

A group of 18 individuals will serve as scientific controls and receive a substance called KLH, for keyhole limpet hemocyanin, which is the oxygen-carrying protein of a shellfish (keyhole limpet) and which has been used extensively in human experiments to measure the function of the immune system.

At the end of the study, three heterosexual volunteers will receive the highest dose that was effectively tested in the others to determine if any differences in reactions or immunizing response exists between heterosexuals and homosexuals.

Microgenesys Inc.'s experimental AIDS vaccine was made in insect cells in laboratory test tubes by genetic engineering techniques using a virus of insects called baculovirus that is harmless to humans, who often eat it with lettuce, cabbage and leafy vegetables.

The insect cells produce the gp 160 protein, which is then separated from insect proteins by a technique known as chromatography. The gp 160 vaccine has been tested in monkeys, chimpanzees and other animals, and they developed antibodies. But the animal results have uncertain meaning for humans, because no one knows what component of the AIDS virus is the most potent stimulator of protective antibodies in humans or what portion of the human immune system is most important in defending against invasion of the AIDS virus.

The baculovirus itself is not injected into the volunteer; nor is the complete AIDS virus. Baculovirus has never been injected into humans before, and the vaccine is contaminated with baculovirus protein.

The N.I.H. researchers will be prepared for emergency measures should a volunteer suffer anaphylactic shock, a potentially fatal allergic reaction. But the researchers believe that the volunteers will suffer at most redness at the injection site, soreness of the arm and a slight fever.

Federal health officials said they chose not to wait to get a completely pure vaccine because of the urgency of the global epidemic of AIDS.

Daily Mail
26th August 1987

Patients save up their own blood

Daily Mail Reporter

SURGICAL patients are being invited to give their own blood for operation.

The scheme means they will avoid AIDS, hepatitis or allergic reactions and recover more quickly. The patients are asked to provide three-quarters of a pint of blood each week in the month before they go into hospital. Batches are then labelled and stored in fridges.

The technique was used in pre-war medicine but has been revived by the Northern Regional Health Authority in Sunderland, Tyne and Wear.

Arranged

Doctors hope it will provide the health service with blood for about 50 per cent of operations arranged in advance and yield extra supplies of the clotting agent 'factor eight'.

Consultant haematologist Dr Lesley Kay said yesterday: 'The scheme has many other benefits apart from avoiding AIDS. It is something which has not been tried in recent times here because of the efficiency of the Blood Transfusion Service.'

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Financial Times
26th August 1987

Soviet AIDS order

The Soviet parliament decreed compulsory AIDS test for Soviet citizens and foreigners and set jail terms for those who pass on the disease.

US condom aid remains a growth industry

AMERICANS are hopelessly ambivalent about condoms. Most get frightfully upset when doctors suggest that they should be advertised on television to help prevent the spread of Aids, yet each year millions of tax dollars are spent on campaigns in distant parts of the world trying to persuade the citizens of 70 other nations to use them.

One explanation for this is that, until this week, many Americans seemed unaware that the government was the world's biggest buyer of condoms — five billion since 1968 or one for each of the world's population today. Nor did they know that the condoms were distributed free or at a

From Peter Pringle in Washington

minimal charge in underdeveloped nations in an effort to bring down birth rates.

News of this ballooning programme, run by the State Department, was brought to Americans without a hint of the customary sensitivity at breakfast time on Monday and Tuesday by the NBC television network. NBC revealed that, although the federal budget is under the chopper and funds for everything from school dinners to missiles are being withdrawn, the condom for foreigners programme, which was started

20 years ago, has doubled.

Mexico recently asked the State Department for three million more on top of the five million it had already received this year. Uganda requested six million this year from an average of 800,000 two years ago.

Some of the increased demand may be connected to the Aids crisis, admits the coordinator of the programme, Jay Morris, who works for the Agency for International Development, or AID. It may also be the result of the aggressive advertising campaign that accompanies the scheme. The colour, shape and brand name of the US condoms

are tailor-made to each country's perceived needs.

Even the best-laid marketing plans can come unstuck, of course. Mexican men were offered the condoms, which are made in Alabama, in three sizes: small, medium and "super-macho". Only the last-named were taken up. The latest batch sent to Mexico were all called "Protecttor" and sales, at a packet of three for 15p, have gone up 300 per cent this year. The number of children in the average Mexican family has dropped by 35 per cent.

It looks like being President Reagan's only Central American policy success.

AIDS: vaccine 'years away'

A PROMINENT British scientist told yesterday's science conference in Belfast that it is too soon to say if a vaccine safe enough for widespread use can be developed to combat the AIDS virus.

Dr. Michael Hall told the annual conference of the British Association for the Advancement of Science that the prospects for such a vaccine "look some years away."

"In the meantime, mankind will have to learn to live with herpes and AIDS and hope that the sustained campaign against anti-social behaviour patterns, coupled with education, preventative measures and counselling can contain the alarming increase in new patients and carriers," Dr. Hall said.

But, Dr. Hall, a researcher with the Roche drug company warned that the ultimate goal would be the use of genetic engineering to cut out the AIDS virus from the human cells of infected carriers: "If this ever proves possible, then the implications will raise serious ethical and moral questions perhaps as difficult to answer as those relating to AIDS itself."

Meanwhile the Soviet Parliament has decreed compulsory AIDS testing of Soviet citizens and foreigners and set jail terms — from five to eight years — for people who knowingly pass on the deadly virus. Tass news agency said yesterday.

Irish Press
26th August 1987

Concert to fight Aids

The Radiators from Space, one of the top punk bands of the seventies, will perform at an Aids benefit concert organised by Gay Health Action in Dublin on September 13.

Gay Health Action is planning a major "Aid to Fight AIDS Week" for next January.

AIDS tests ordered

THE Soviet Union yesterday ordered compulsory testing of citizens and foreigners suspected of carrying AIDS (Acquired Immune Deficiency Syndrome) and threatened up to eight years' imprisonment for knowingly infecting someone else.

The decree by the Supreme Soviet (Parliament) follows a steady increase in the number of cases reported in the country.

"The citizens of the USSR, as well as foreign citizens and stateless persons living or staying in the territory of the USSR, may be bound to take a medical test for the AIDS virus," the decree said.

Suspects who refuse to have a test can be brought to clinics by health authorities aided by police, said the decree carried by the Tass news agency. Foreigners can be expelled from the country if they refuse to take the test, it said.

"Deliberate exposure of another person to the danger of being infected with AIDS shall be punished with up to five years in prison," the decree warned. "The infection of another person with AIDS by a person aware of having AIDS shall be punished by up to eight years in prison."

An official report last week said 130 cases of AIDS had been confirmed in the Soviet Union, although only 19 were Soviet citizens. Three people have died from AIDS, all of them foreigners. — (AFP, UPI).

● An anonymous bomb threat forced the evacuation of an elementary school in Arcadia, Florida, yesterday as three haemophiliac brothers infected with the AIDS virus arrived to begin school. After a 40-minute search, classes were resumed. — (AP)

Aids test for all in Russia

Moscow (Reuter) — The Supreme Soviet, the country's Parliament, has decreed compulsory Aids testing of Soviet citizens and foreigners and set jail terms for people who knowingly pass on the deadly virus, Tass said yesterday.

The decree said: "Soviet citizens, as well as foreign citizens and stateless persons living or staying on the territory of the Soviet Union, may be bound to take a medical test for the Aids virus."

Those who dodged the test could be brought to hospitals, if necessary with the help of the police, if there were grounds for believing they were infected with Aids, the decree said. Foreigners who dodged the test could be expelled.

The decree ordered prison terms of five years for people who deliberately exposed others to the risk of infection from Aids and eight years for people who passed on the disease. Similar penalties apply to people who knowingly transmit venereal diseases.

The Soviet Union at first treated Aids as a problem of the decadent West but has recently launched research programmes into the disease. The official media have also started to give more factual information about it.

The exact number of Soviet victims is unclear. In March, Soviet doctors said 32 cases had been registered, all but two of them affecting foreigners who were deported. But in June, the press wrote about a Soviet homosexual who had returned from a foreign trip with Aids and who had unwittingly infected at least six other people.

Academician Valentin Pokrovsky said then that although the situation in the Soviet Union, where homosexuality is illegal, was not as bad as in the West, the Aids problem had taken a worrying turn. Before yesterday's announcement the media had been urging people to have voluntary tests.



Aids and herpes

Search for cure could use 'super race' techniques

The search for a cure for Aids, herpes and other viral diseases could lead to genetic manipulation of the type that scientists would employ to produce a "super race" of people, a drug company expert told the British Association meeting in Belfast yesterday.

The goal of selecting and removing specific human genes linked to the diseases in infected individuals would raise serious ethical and moral questions "perhaps as difficult to answer as those relating to Aids itself", Dr Michael Hall said.

"It would mean that we could manipulate at will the human genetic pool, produce super races, modify ethnic traits, excise socially unacceptable habits - in fact produce people to order."

Although such advances could help to eliminate some inherited diseases, Dr Hall added: "The potential for abuse is real and there must be many who hope that such technologies are never developed."

Dr Hall, head of the chemotherapy division of the Roche Products pharmaceutical company, at Welwyn Garden City, Hertfordshire, was talk-

ing on the prospects for effective drugs against Aids, herpes and other diseases caused by viruses.

He said this "brave new world" might never happen, but it could result from the rapid development of genetic engineering techniques. More realistically, the advances were likely to lead to more effective drugs against Aids.

"Ten or 15 years ago, these techniques were unavailable and we would have been

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almost helpless in the face of the advance of Aids. At least we can now see and understand the enemy as the first step in its defeat."

Among the many thousands of viruses which cause several hundred human diseases the Aids-causing human immunodeficiency virus (HIV) was probably now the best understood only five years after it was first identified, Dr Hall said.

The catalyst for this "explosive growth of knowledge" was the sociological and economic concern about the epidemic spread of the disease.

Advances in genetic engineering had given greater insights into viral molecular biology than could have been imagined 10 years ago. The result was that anti-viral drug research had been catapulted from "a relatively minor and somewhat leisurely pursuit", to the top priority of many drug companies and research institutes around the world. "In certain respects progress has been spectacular."

However, the herpes and Aids viruses were among the most complex and sophisticated, posing huge problems for drug development. They were able to invade the body's nervous system and lie dormant for years if not for the lifetime of the infected individual. Both could hide within human cells, inducing disease from entrenched positions.

Drugs developed to treat herpes in the past 10 years had been unsuccessful either because of their unexpected toxicity or their lack of activity. In addition the arrival of the Aids epidemic had diverted a very significant part of the scientific effort away from herpes drug development, Dr Hall said.

While there was "very real hope" of producing drugs to control the symptoms of herpes and Aids infection by preventing or depressing the rate of virus multiplication in the body, the latency of the viruses was still the biggest problem, he said.

The search for a herpes vaccine had failed in spite of 66 years of research. The Aids virus was presenting "unexpectedly difficult problems", he said. "It is too soon to say if an HIV vaccine safe enough for widespread use can be developed but the prospects look some years away."

Meanwhile, mankind would have to learn to live with Aids and herpes in the hope that public education and prevention measures would contain the "alarming increase" in new patients and carriers.

In the case of Aids, drugs now being developed would reduce the infectiousness of those people with the disease and hence its spread. "It is here that the efforts of chemists are truly at the leading edge in the battle for health, not just in Britain but in the world as a whole", Dr Hall said.

26/8/87

AMERICAN FOCUS

State Lawmakers Take Lead In AIDS-Related Legislation

By JOE DAVIDSON

Staff Reporter of THE WALL STREET JOURNAL

WASHINGTON—While officials in the U.S. capital wrestle with the question of what to do about AIDS, most of the concrete action on the issue has been taking place elsewhere—in the 50 state capitals.

AIDS-related bills are flooding state legislatures. During the height of the state legislative season, five to 10 AIDS-related measures were being introduced every day, according to Richard Merritt, director of the Intergovernmental Health Policy Project. All told, some 550 such measures have been introduced in legislatures this year.

The largest proportion of those bills, about 20%, have to do with mandatory testing, principally of marriage-license applicants, for AIDS, or acquired immune deficiency syndrome. "Every state legislature—if they haven't already—is going to be faced with a mandatory testing bill or a bill to prohibit mandatory testing or both," says Woodrow Myers, Indiana's health commissioner and president of the Association of State and Territorial Health Officials. In addition, however, legislators are grappling with questions such as health-care costs, confidentiality and discrimination.

The question of whose rights to emphasize has been central to the AIDS debate in state capitals just as it has been in Washington. It focuses on the age-old political problem of "the rights of society versus the rights of individuals," says Philip Lee, director of the Institute for Health Policy Studies at the University of California, San Francisco. Dr. Lee says the "ideological debate" has contributed to the flood of state AIDS bills, with the political right wing a main source of legislation.

Greater Number of People

In some ways, the AIDS debate has turned conventional political debate on its head. On most issues, the political right historically has tended to emphasize individual rights; in this one, though, many conservatives are pushing measures that they argue will protect the great number of people who aren't infected.

So far, complains State Rep. Penny Pullen, a conservative Republican Illinois legislator, public health officials have placed "the right of individual protection above rights of the public to be protected and remain uninfected." Rep. Pullen, who recently was appointed to President Ronald Reagan's national commission on AIDS, was a key figure in the Illinois legislature's approval of a controversial "public protection package" of AIDS-related measures. Gov. James Thompson is expected to act on the bills next month.

Among other things, the measures require AIDS testing of prison inmates, convicted prostitutes, other sex offenders, intravenous drug users and certain hospital patients. Public health authorities must notify school officials when students test positive for AIDS, and corpses of AIDS victims must be so labeled.

One particularly controversial bill mandates contact tracing—the tracking of intimate partners of those who test positive for AIDS. Bernard Turnock, the state director of public health, initially opposed the measure. But while the issue was being deliberated, Republican members of the state Senate served notice that if he "did not change his stance (against) contact tracing, he would not be reconfirmed," says Tom Schafer, a spokesman for the Illinois Department of Public Health. After reaching a compromise with the Republican leaders, the director was reconfirmed.

"The kind of bills that have been passed in Illinois really runs counter to the general consensus so far in the states, that voluntary cooperation is really the way to go," says Mr. Merritt, whose health project at George Washington University studies trends in state health policies.

Few state mandatory-testing proposals have become law because most public health officials don't think broad testing is cost-effective. A positive AIDS test doesn't mean that the patient has the disease. It does indicate that he or she has been infected by the virus and can pass it to others.

Mr. Merritt says 79 premarital-testing bills were introduced in 35 legislatures this year. So far, however, only Louisiana, Illinois and Texas have passed bills requiring testing of marriage-license applicants, and only Louisiana's has been signed into law. The Texas legislation wouldn't take effect until indications of the disease in the state have jumped substantially, but the Illinois and Louisiana statutes take effect regardless of the incidence of AIDS.

While testing and contact-tracing have been big issues this year, future legislative sessions are expected to come to grips with financing the AIDS fight and even the question of quarantine. M. Roy Schwarz, an assistant executive vice president of the American Medical Association, thinks that "sanctions against those who (test positive) but refuse to behave themselves" are a real possibility.

Dividing Up the Public Cost

Still unanswered is who will pay the AIDS bill. With budget austerity the watchword in Washington, "clearly this is something that has to be done in partnership by the federal government, states, localities, the private sector," William Roper, head of the federal Health Care Financing Administration, said recently on a television news interview program. "Everybody has to deal with this monumental problem."

But dividing up the burden also is difficult.

Medicaid, the federal-state health program for poor people, hasn't yet been severely hit by AIDS costs. Nonetheless, the states, which pay half the Medicaid bill, are preparing for an increased burden. All but nine states have decided to allow Medicaid coverage of the estimated \$10,000 yearly per-patient cost of a drug that may prolong the life of AIDS patients. And "all the states are going to be hit hard eventually on the question of who is going to pay when the private sector and Medicaid doesn't," predicts Dr. Myers, also a member of the president's AIDS commission.

Already, funding on AIDS has jumped as awareness—and fear—have increased. During the past three years, total state expenditures for AIDS-related activities rose more than threefold, to \$92.7 million from \$27 million, according to an Intergovernmental Health Policy Project report. State spending hasn't been directly related to the number of AIDS cases. New Jersey spends more than the combined expenditures of Florida and Texas, yet has fewer cases than either. And California spends almost twice what New York does, despite having fewer total cases.

Despite the differing levels of spending in the states and the variety of approaches to the problem, politicians and public health officials agree with Illinois's Rep. Pullen, who says: "The states have a heavy responsibility, because it is generally in the states where the public-health power resides."