

Was President Reagan told about the Soviet AIDS offer?

by Lyndon H. LaRouche, Jr.

The following bulletin was released by the news bureau of the LaRouche Democratic Campaign on May 21.

An authoritative high-level source in the U.S. government has reported that during last week, Soviet scientists offered the United States cooperation on combatting AIDS. However, according to the information received, someone in the State Department refused the offer. It is strongly indicated that Project Democracy-linked Herbert Romerstein inside Charles Z. Wick's U.S. Information Agency (USIA), had a hand in shaping the U.S. rejection of the offer at this time.

The reported basis for the State Department rejection is a childish excuse: that the U.S. can not work with Moscow's scientists on AIDS until Moscow takes back the published charge that U.S. biological-warfare agencies had "invented" the AIDS virus.

If this report is fully confirmed in all respects, the State Department representatives involved should be severely censured.

AIDS is the one area in which all nations of the world face the most deadly enemy of all mankind. The spread of the disease in any one continent or nation is a deadly menace to the populations of every continent and nation. AIDS is the one affliction from which we should seek to protect the Soviet population and they should wish to defend ours.

It is true that the Soviet politicians, at a very high level, did accuse the U.S. government of creating AIDS. However, that Soviet attack was directly against me personally, in response to my friends' exposure of the Soviet officials' key role in organizing the same 1986 international cover-up in which U.S. Surgeon General C. Everett Koop came to play a key role. If the United States refused to negotiate in any area in which Moscow had published outrageously false charges against the U.S. government or U.S. public figures, we would never have negotiated any matter with Moscow.

The matter should be called to President Reagan's attention immediately, and the Soviet offer, if confirmed, should be taken up by a special exploratory commission of scientists. I would be happy to assist the President in setting up the commission and aiding its work.

The policy question

Increasingly, since immediately following the November 1986 California election, it has been made clear that every

accusation made against the sponsors of California anti-AIDS Proposition 64 was medically incompetent. Six months later, everything which my collaborators and I stated on the subject of AIDS has been confirmed beyond any remaining scientific basis for objections.

It was I who proposed publicly to the Soviet government, that I, as President of the United States, would regard the war against the species-threatening AIDS pandemic as the one area in which even adversaries such as the U.S. and U.S.S.R. must pool their scientific capabilities for developing cures and otherwise combatting this deadly infection. The relevant Soviet health officials prominently signaled a willingness to cooperate with the U.S. government this way. The signal from those scientists was prominently featured, and represented as a serious offer, by relevant actions of the Soviet government.

The area of scientific cooperation which I emphasized for attention of Soviet scientists was a special, very crucial area of biological research seeking a cure. This is the area of biological research called "optical biophysics." Work in this area of biological research is sometimes listed in the scientific literature under the title of "nonlinear spectroscopy" of electromagnetic absorption and pulse radiation of living processes.

Optical biophysics was introduced to Soviet research approximately 60 years ago, and fundamental sorts of preliminary contributions to this field were effected by some scientists there during as early as the 1930s. Moscow has a number of leading specialists and specialist teams, including that at the primate center in the Caucasus, which could make a valuable contribution to international efforts in understanding and fighting AIDS.

However, it is the United States and Japan, working together, which have a near-monopoly, presently, on the ability to produce the kinds of instrumentation needed to conduct experiments of the type which AIDS requires. Also, there are teams in West Germany, Italy, France, and Britain, which each offer uniquely valuable, specialized kinds of contributions to such a common effort, as well as the molecular biology laboratories of major pharmaceutical firms.

The further development and production of the instruments required, combined with the various capabilities of teams of specialists in various nations, would be our best hope of achieving the needed understanding of, and cure for

AIDS at the earliest date humanly possible.

The following key points are central for defining U.S.-Soviet scientific collaboration in combatting AIDS.

1) For purposes of U.S. and international public health policy-making, the English-language term "AIDS" refers to a rapidly spreading and rapidly evolving sub-order of viral infections, rather than a single, fixed form of virus.

2) At present, there is no reasonable expectation that a vaccine or cure for AIDS could be developed for general use earlier than five years, more probably not earlier than ten.

3) The infection has an indicated incubation period of from several to 15 years, preceding an outbreak of symptoms which are presently indicated to be virtually 100% fatal. During nearly all of that period of incubation and symptoms, the infected person is a transmitter of the infection to other persons.

4) Potentially, the infection can be transmitted from a carrier in almost any way that any other viral infection might be transmitted. The infection is not limited to "high-risk" modes of transmission. Rather, the possibility of transmission of the infection is divided among "high-risk," "medium-

risk," and "low-risk" categories. Worse, as the number and density of infected persons increases, and as the virus adapts and evolves into new varieties and species, new methods of transmission appear, and today's "medium-risk" routes of infection tend to become tomorrow's "high-risk" routes. Also, the probable transmission of the infection from carriers varies with both environmental co-factors and the level of resistance in the uninfected portion of the populations.

5) Governments must therefore assume, that, since during the coming five to ten years, there will be no vaccine or cure generally available, that only measures of isolation of carriers of the infection can stop the spread of an infection. At present, the best-known estimates for increase of the number of persons infected, without isolation of carriers, is a doubling of the number of such cases each eight to twelve months.

6) Therefore, the only responsible policy for all governments, is: a) a policy of mass screening, isolation, special care, and highest investment possible in research, and b) international cooperation to assist each nation in controlling the spread of the infection among its population.

Interview: Dr. Bertha Farfán

Mexico is ripe for an epidemic

The following interview with Dr. Bertha Farfán, coordinator of medical research for the Schiller Institute in Mexico, was conducted by EIR correspondent Lucía Méndez on May 8.

EIR: In recent weeks, the Mexican press has reported on the panic caused by the AIDS situation. The Secretary of Health declared that AIDS is a terrible epidemic, which will consume the entire health budget. We know that you toured the country both to lecture, and to investigate the true situation with respect to AIDS. What can you tell us about this?

Dr. Farfán: AIDS is becoming an epidemic, well before anyone had foreseen it. There are various reasons for this. First, Mexico is in an unfavorable situation because of its borders with the United States, where it touches those states with the highest incidences of AIDS, like California, Texas, and other states where Mexicans go, like Florida or New York. This situation has increased the number of AIDS cases. Mexico has tourists all year long, especially from the United States. Another reason is that Mexico has conditions that serve as a hotbed for retroviruses like AIDS.

EIR: What are those conditions?

Dr. Farfán: Crowding, the proliferation of mosquitoes, and

high levels of virus epidemics; that is, persons who constantly suffer from viral diseases. Generally, this is due to malnutrition.

In Mexico, the problem of crowding is very serious. It has been calculated that there is a yearly deficit of 1 million dwellings. A majority of the rural population lives in shacks with no floor, constructed of sheet metal or branches, without any type of public services, like running water or sewers. More than 10 persons live in each house, sleeping in only one room.

With respect to the incidence of insects, in recent years, the problem has been enormously aggravated, and is reflected in the incidence of illnesses transmitted by them, like malaria and dengue. For example, in 1977 there were 19,361 cases of malaria; in 1980, 25,734 cases; in 1981, 42,104 cases; in 1983, 75,069 cases; in 1984, 85,501 cases; in 1985, 116,979 cases; in 1986, 130,200 cases. Thus, the health authorities have been at the point of declaring a state of emergency because of the resurgence of malaria.

In the case of dengue, after having been eradicated, the first 36 cases reappeared in 1977; in 1980, there were 51,406 cases; in 1981, 17,040 cases; in 1983, 19,023 cases; in 1984, 26,089 cases; in 1985, 36,182 cases. If you compare the figures for malaria as well as dengue, over a period of eight years, the result is a 1,000% increase.

EIR: Why do you think this is the case?

Dr. Farfán: Well, these are just two examples, and they are not the only ones. It is the case that the regional authorities tried to get DDT and aid to eradicate insects, but they did not receive either of those two things, basically because the budget cuts in the health sector prevent having enough resources to

7) Since viruses easily pass ordinary Customs checks, the spread of the infection in any nation is a threat to all nations.

8) Without mass screening and isolation, if we assume that no vaccine or cure were generally available earlier than 10 years from now, the number of infected persons would seem to be more than 200 times the present number of cases infected—very bad news for any nation which has presently as much as 1% or more of its population infected. Without a cure, all of those infected persons would die, most within five years or so, and nearly all within about 15 years. Unchecked by public health measures including mass screening and isolation of carriers, AIDS is the first sub-order of virus infections which has the potential to wipe out the human species in less than two generations of a continuing pandemic.

9) AIDS is therefore the common enemy of all humanity, and international relations in this matter must be so ordered.

As a matter of added information, since the AIDS viruses infect the cell chromosomes directly, among other locations, the development of a true cure demands digging the infection out of the cell's chromosomes, probably during mitosis,

without destroying vital tissue. There is a line of optical biophysics research which addresses this kind of problem directly: the spectroscopy of the mitotic process. Enormous work must be done in this area, in a concentrated and accelerated way, since our present knowledge of spectroscopy of the mitotic process is far too limited to show us an effective approach to developing a cure for AIDS.

A "crash program" of research into the spectroscopy of the mitotic process, is the center of the area I have stressed for potential U.S.-Soviet scientific cooperation.

Who invented AIDS?

The charge that U.S. biological-warfare centers "invented" AIDS deliberately, is typical of the way in which the Soviet political propagandist works. From such sources, or idiots such as USIA's Herbert Romerstein, such silly charges and countercharges are to be expected.

The charge, made most prominently by the same Dr. John Seale against whom Romerstein has circulated his lies, is that there is a high scientific probability that human AIDS might have gotten its start in a certain line of cancer-research going

wage these campaigns.

Now, the problem is that AIDS has a very close relation with transmission of illnesses by insect bites, as experiments by the Pasteur Institute in France demonstrated.

If this situation seems grave, then look at the state of nutrition. At this time, 40% of the adult Mexican population is malnourished; 80% of the infant population has protein malnutrition. I want to emphasize the problem of infant malnutrition because it reflects the gravity of the problem. Of 2 million children born per year, 100,000 will die of malnutrition before they are five years of age. One million children will have brain and physical damage that is irreversible.

That means that of the 2 million children who are born each year, only 900,000 will have the opportunity to have a more-or-less normal life.

This is obviously due to the austerity measures and looting of the International Monetary Fund and World Bank. If we compare the minimum wage of workers in 1980, with present-day salaries you can see what has happened. In 1980, the minimum wage was equivalent to \$2 per hour; today, the minimum wage is equivalent to less than 40¢ per hour. Moreover, comparing this with buying capacity, the total minimum wage per day is equal to the cost of 1.5 kilograms of meat.

From what I have said before, it can be deduced that the economic problem is the principal cause of the outbreak of AIDS in the country. Definitely, in those places where the economic crisis has hit the hardest, in the poorest areas, the scourge of AIDS has been the worst.

EIR: What parts of Mexico are the most affected?

Dr. Farfán: It is difficult to determine with precision which

areas are the most affected, because there is no real epidemiological study—not even the health authorities have it. From what is known today, thanks to the information given by the laboratories, doctors, government organizations, and private clinics, it is known that Mexico City, Cuernavaca, and some states in the north of the country are the most affected.

In Cuernavaca, in the Civil Hospital of the city, they analyzed the blood of donors, and found 130 AIDS virus carriers. Cuernavaca has officially reported 5 AIDS cases; nevertheless, it can be deduced that there are 630 AIDS carriers. If we divide this number into the total population of the city, it can be said that 1 out of every 500 persons is infected with AIDS.

Cuernavaca is a good example of what we have already said; it brings together the special conditions for propagation of the virus. It is a tropical climate, it has a very polarized social structure, with international and national members of the oligarchy, like Armand Hammer, and then a large, very poor population. It also has a very high migrant homosexual population, because it is a tourist and recreation area.

The other problem coming up in Mexico and which is going to raise the epidemic to the level of pandemic, is the new U.S. immigration law, known as Simpson-Rodino. Immediately upon application of this law, thousands of Mexicans were deported [from the U.S.], among them AIDS carriers. Of the first group of 1,350 deportees, 55 of them were AIDS carriers.

The chief of health of Ciudad Juárez sought quarantine for those infected; nevertheless, Dr. José Luis Domínguez Toris, member of the National Committee for the Investiga-

on in numerous nations during the 1960s. That including some non-human species of AIDS-like virus in certain cancer-virus experiments, could cause a kind of recombination leading to creation of a human AIDS-type virus. Dr. Seale has pointed to such cancer experiments performed on living samples of human tissue as the way in which such a result could be brought about accidentally.

Such kinds of cancer experiments were being conducted by various kinds of official and private laboratories in both the East and the West. It is therefore possible that a U.S., WHO-sponsored, or Soviet laboratory might have suffered such an accidental production of a human species of AIDS-like virus.

Some specialists have stressed, that if we could discover how and where such an event might have occurred, this, by itself, would be a valuable clue in the fight against AIDS today.

These were the points stressed by Dr. Seale and by my associates. Since I was associated with posing this question, the Soviet government, which has officially classed me as

tion and Control of AIDS, and director of the National Transfusion Center for Mexico City, said that it was not necessary, and obliged the health chief to let them go. Those 55 persons will go to their places of origin, and will infect their spouses, children, parents, etc.

EIR: Speaking of measures that some want to take, and cannot, what is the official policy of the government on confronting this mortal disease?

Dr. Farfán: Before directly responding to your question, I would want to comment on some statements made by Dr. Guillermo Soberón Acevedo, Mexico's Secretary of Health, in a TV interview, after Congress debated the new health law.

In that interview, Dr. Soberón said that there are 407 AIDS cases in Mexico, and by 1991, there will be 31,000 cases. He added that for every case, there are 100 infected persons. That means, according to the Secretary of Health's own data, that at this moment, there are 40,700 persons infected with the AIDS virus. Soberón said that 100% of them will die, because no person has recovered from this disease. He also said that AIDS can be transmitted through blood, saliva, semen, tears, sweat, and every type of human bodily fluid.

In spite of the fact that he recognizes that AIDS is not exclusively a sexually transmitted disease, Dr. Soberón says that the only way to control the disease is with "safe sex," using condoms and sex education given to the entire population. In reality, the only thing that is being done is converting the campaign against AIDS into a campaign for sexual liberation and family planning.

The World Health Organization has stated that if so much money is going to be spent on an anti-AIDS campaign, then

"Soviet public enemy number one" in the world today, naturally retorted by attacking the U.S. government. That is the way the Soviet propagandist's mind works.

That is what that story is all about. The problem has been that the USIA's Project Democracy-linked Herbert Romerstein, whose twisted little brain functions much like a Soviet propagandist's, issued disinformational reports which transformed a Soviet attack upon me personally, into alleging that John Seale and I were the authors of this particular piece of Soviet propaganda.

Last week, according to the high-level State Department source, it was Romerstein's perverted attack on me which was used as a pretext for turning down the best offer Moscow has made to us recently.

If every other negotiation with Moscow were scrapped, and if scientific cooperation on AIDS could be established, President Reagan would truly go into history-books as a man who made a great contribution to all humanity. Despite twisted minds like that of Romerstein, the President should be offered the chance to earn that honor.

we have to take the opportunity to launch a family planning campaign.

EIR: Could you tell us who is in charge of the program to combat AIDS?

Dr. Farfán: Before answering your question, I would want to emphasize how serious the problem is. Assuming that the only persons ill are the 407 officially reported, it means that for every 1 who is sick, we have 100 who are infected; that is, there are 40,700 persons infected. That means that by population density, 1 out of every 2,000 Mexicans is infected with the virus. And here I am not including the infected deportees, nor the tourists who have AIDS and are patients in hospitals here, and who are returning to our beaches.

And what is going to happen? By 1991, within four years, we will have 31,000 cases. That means that we will have 3,100,000 infected, and in terms of density, we will have 1 out of every 100 Mexicans infected with the AIDS virus.

I wanted to repeat and emphasize this aspect, because these figures are calculated based on the information provided by health authorities, and thus these figures show that the problem is hair-raising.

As well, the National Committee for Investigation and Control of AIDS is focusing on AIDS as a sexual disease, and all they are doing is publishing brochures recommending how to have safe sexual relations, that border on the obscene and perverse.

It is of the utmost importance to know that various members of this committee are professed homosexuals, like Dr. Luis González de Alba, the committee's psychologist, and Dr. José Antonio Izazola, committee coordinator, and also a homosexual. The committee is definitely propagating homosexuality,