

AIDS researchers warn: 40 million infected by turn of the century

by Joyce Fredman

Over 11,000 people representing 133 countries gathered in Amsterdam, The Netherlands starting on July 19, for the Eighth International Conference on AIDS. The week-long meeting, with some 5,000 scientific presentations, was sponsored by Harvard University and the Dutch government, and co-sponsored by the International AIDS Society and the World Health Organization.

Ironically, the very same AIDS science mafia which, during the 1980s, hysterically denied the magnitude of the AIDS threat worldwide, has now taken to the podiums to warn that inaction on the part of the world's governments will cause mass deaths on the largest scale mankind has ever witnessed. The AIDS mafia is still promoting the false view that AIDS is a sexually transmitted disease, so that they can link AIDS budgets to measures for population control; but nevertheless, a picture of the true magnitude of the crisis is beginning to come out. The Amsterdam conference was an important forum for this.

During the 1980s, *EIR* and Lyndon LaRouche were virtually alone in warning of the reality which the so-called experts are now, finally, forced to admit. (See *Documentation* on page 9 for a summary of LaRouche's program.)

Estimates revised upward

Authorities everywhere are now raising their estimates as to the projected number of victims. The World Health Organization (WHO), under the auspices of the United Nations, predicts that upwards of 40 million people will be infected with HIV, the AIDS-causing virus, by the year 2000; but the Global AIDS Policy Coalition, a Harvard University-based research group headed by Dr. Jonathan Mann, has developed a computer model that predicts that a staggering 110 million people will be infected. Independent researches have pushed the number up as high as 150 million. As one doctor said, "Whether we talk 40 million, 50 million, 80 million, or 100 million, it's a terrible epidemic and we need to act on it." Researchers agree that 75-90% of infections will occur in the underdeveloped sector.

Dr. George Lundberg, editor of the *Journal of the American Medical Association*, gave a briefing to the press on July 18, noting that as many as 10 million people are believed to be infected, and by the year 2000 that number will be 40

million—a fourfold increase. "Perhaps not since syphilis among the Spanish, plague among the French, tuberculosis among the Eskimos, and smallpox among the American Indians, has there been such a threat," he warned.

Lack of political leadership

Dr. Mann, who is chairman of the conference, tried to maintain an upbeat focus, insisting that this be a conference of hope, based on the will and commitment and capacities of all those attending, despite the horrendous predictions. "This is really a conference here of hope, not a conference of despair. We see people bringing together their knowledge, their experience. We know that we can do better. We know, in fact, we can control AIDS and care for the people who need care," Dr. Mann told the television news program "Good Morning America."

Even with his Pollyanna demeanor, Mann minced no words when it came to the pathetic record of the Bush administration and the implications of its inaction. Mann said that the United States is "desperately lacking political leadership on the question of AIDS." In no way is the response of the Bush administration commensurate with the problem; hence, "you have this gap emerging between the accelerating pace of the epidemic, the flattening or diminishing of the response . . . [the] gap is widening rapidly and dangerously. So we're at the critical moment. Either we're going to close the gap . . . or we're going to see this epidemic carry forward and really spin out of control." In another interview, Mann reminded ABC News reporter Chris Wallace of the President's statement that we spend 10 times more on AIDS than on cancer. Mann suggested that possibly someone should be so bold as to tell President Bush that not enough is being spent on cancer either.

Dr. Michael Merson, head of the WHO Global Program on AIDS, underlined the paltry amounts of money allocated to this fight. On the continent of Africa, \$2 per person is the average *annual* amount spent on health care, despite the fact that of the 13 million people infected with AIDS worldwide, 8 million live in Africa. Besides wiping out entire populations of cities, he projected that by the year 2000, there will be 10 million orphans on the African continent.

Most of the new AIDS cases (over 70%) involve hetero-

sexuals in Africa, Asia, and Ibero-America. The number of infected has tripled in five years, and while about 1 million Asians are infected with AIDS, Asia may overtake Africa by the end of the decade, according to Dr. Mann. By the late 1990s, India could have more people infected with HIV than any other country, the chairman stated. Whole villages and population groups are destined to die in Kenya, Uganda, and Zaire. "If you look at what's happening in Africa and what will happen in Asia, you have reason to be very pessimistic," said Dr. Anthony Fauci, head of the U.S. government AIDS research efforts. "All the signs indicate that the pandemic is not slowing down at all."

Disease of poverty

Even though the conference participants continued to maintain the coverup line that AIDS can only be transmitted by sexual intercourse, mother to infant, and blood transfusions, it was also affirmed that the virus is exploding in Africa and Asia much faster than in the industrialized nations. No explanation was offered for this; but clearly, the virus travels faster among the poor. Dr. James Curran, director for the HIV/AIDS division at the U.S. Centers for Disease Control, said that although AIDS is expected to level off in the relatively richer West, even there the poor will be extremely hard hit. "Throughout the world, the virus is winning flat out," he said. The link between poverty and AIDS was a recurring theme.

Dr. Marcus Conant of the University of California in San Francisco told the conference that AIDS was once seen as the scourge of homosexual men and drug users, but has now overwhelmingly become a killer of the poor. In Brazil, some AIDS patients sell their free AZT (the only drug which has so far been licensed for initial treatment of AIDS) for food, noted Dr. Maria Eugenia Fernández, an adviser to Brazil's AIDS control and prevention program. "Poverty is everywhere," she said. "The AIDS epidemic is showing us in a tragic way the fragility of our health care."

U.S. government inaction

While the Third World will be most severely hit, Dr. Curran told the conference that in the United States, a total of 230,179 AIDS cases had been reported by the end of June, and 152,153 Americans had died. The number of new AIDS cases has been steadily increasing, with 47,457 new cases in the last year alone.

By the end of 1994, as many as 535,000 cases are expected to have been reported in the United States, with as many as 385,000 fatalities, according to Curran. In addition, the number of Americans living with AIDS or other diseases caused by HIV will continue to increase. The proportion of increase will be greatest among the poor and minorities.

A report from Dr. Philip Rosenberg of the National Cancer Institute, written in the *Journal of the American Medical Association*, had similar figures. Made public in Amsterdam

for the conference, Dr. Rosenberg's report said that "one in 57 men in Washington developed AIDS in the 10 years up to 1991, more than six times as many as in the United States as a whole." U.S. cases could be expected to level off, but cases in the federal capital would increase by as much as 34% from 1990 to 1994, he wrote. "Trends in the nation's capital may be similar to those in other urban areas." Since the mid-1980s, Washington has seen 700 new AIDS infections a year among intravenous drug users, 200 through heterosexual contact, and 150 in men who have sexual relations with other men.

As stark as these figures are, conference participants agreed that they haven't received the attention of Washington's most illustrious inhabitant. Actress Elizabeth Taylor stated to the conference, "I don't think President Bush is doing anything about AIDS. I'm not sure he even knows how to spell AIDS." On the MacNeil-Lehrer television program, Mark Harrington, spokesman for the AIDS Treatment Action Group, was even more blunt: "The most important point that we have in our report is that as a nation, the U.S. is abandoning its commitment to eradicate the disease AIDS, whereas the world 20 years ago made a commitment to eradicate smallpox, and did so 10 years ago. America, which is the flagship of the worldwide biomedical research establishment, has not committed to the eradication of AIDS and in the President's budget for this year, for example, AIDS research doesn't even keep up with inflation. . . . We have a government in gridlock, neither the President nor Congress able to coordinate a rational campaign against AIDS or any other serious disease."

New strains

It now appears that a new, undetectable AIDS virus may be emerging. According to *Newsweek* magazine, doctors have identified about a dozen cases in which patients have developed acquired immune deficiency syndrome but never tested positive for either of the known AIDS viruses, HIV-1 or HIV-2. Thomas Spira, epidemiologist at the U.S. Centers for Disease Control, is studying six American AIDS patients who tested negative for HIV. "We don't have any indications that this is a widespread problem," stated Dr. Harold Jaffe, acting director of HIV/AIDS at CDC. "But we're taking the evidence seriously." The implication of this news is that blood transfusions which were formerly considered safe, may not be so.

Gerald Myers of the Los Alamos National Laboratory in New Mexico pointed out that AIDS viruses mutate with extraordinary speed, and so far, HIV-1 alone has spawned five different strain groups. When asked if this could be the first sign of a third AIDS virus, Myers said, "If an HIV-3 were to appear, it would . . . fail to respond to standard tests," just as the other strains have done.

This seemed to confirm the gloomy predictions of an Australian medical conference in Sydney the week before.

"At the moment, we have classical conditions for the spreading of some of the past plagues, particularly due to the disruption of normal populations," Frank Fenner, professor of microbiology at Canberra's John Curtin School of Medical Research, told reporters. "We have refugees all over the place living under very bad conditions, these are exactly the sort of conditions under which pandemic plagues are likely to occur."

Fenner said that 20 years ago there were about 5 million people classified by the United Nations as refugees, but now

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he estimates that the number has increased tenfold. "We don't know what it [the plague] will be, or where it will be, but there will be one, we only have to look at history, and see the number of plagues that have occurred, wiping out large numbers of the population," he warned.

No cures seen this century

More than a decade after the first case of AIDS was diagnosed, there still is no word on a cure. Progress is far slower than scientists had predicted five years ago, yet they insist that they have confidence that an effective vaccine can be developed by the mid-1990s. Even so, it is unlikely to be widely available before the next century.

One area of potential good news was given by Max Essex, a Harvard University researcher. He thinks real progress was being made in designing chemicals to outwit the HIV virus. Discoveries enabling researchers to infect monkeys with human AIDS should speed the process. Previously only chimpanzees and gibbons, both endangered species, could be infected with HIV. "I'm optimistic it will work," said Essex. "The new monkey models offer a tremendous way to test new products sooner."

Dr. Daniel Hoth of the U.S. National Institutes of Allergy and Infectious Diseases, which coordinates AIDS vaccine tests, also seemed optimistic. "The encouraging news is that the more recent trials have shown a higher frequency of neutralizing antibodies, which kill HIV directly." Approximately a dozen vaccines are now in various stages of testing in humans.

One experimental vaccine made from a genetically engineered version of the gp120 protein, which serves as the envelope of the AIDS virus, was well tolerated by volunteers who received it and produced a variety of positive responses, reported Dr. Mary Lou Clements of the Johns Hopkins University in Baltimore.

Previous studies showed that the vaccine, made by Genentech, Inc. of San Francisco, California, protected chimpanzees against one strain of the AIDS virus. In a new study, 28 uninfected humans received three injections of either one or two doses of the vaccine or a useless substitute. No serious side effects were reported, and 9 out of 10 volunteers who received the highest dose of the vaccine produced a variety of positive immune system responses, including the production of "neutralizing antibodies," which are proteins produced by the immune system that can kill HIV.

Jonas Salk, developer of the polio vaccine, also made a speech to the conference regarding his work on a vaccine. But he disagreed with most other participants on the approach that should be taken. Most of the scientists and companies are working on a vaccine that would produce high levels of protective antibodies. But Dr. Salk thinks what patients need is a lot of immune cells to kill the AIDS virus, which hides inside infected human blood cells. Therefore, he maintains, researchers should be working on bolstering the body's immune cells, as opposed to the antibodies which kill the HIV virus.

He bases his approach on studies of people who successfully threw off the AIDS virus after exposure, including babies of infected mothers, and health care workers. Many were skeptical of such a viewpoint, and questioned his data. He is now developing a vaccine made from an AIDS virus that has been killed.

One note of caution was made by Dr. Karl-Otto Habermehl, director of Berlin's Institute for Clinical and Experimental Virology at the Free University. He predicted great progress on a vaccine in the next year, but said that a preventive vaccine would be easier to develop than a therapeutic one, designed to treat people already infected.

Despite whatever progress is being made on the research end, the pace of the effort is not at all in step with the disease. One person is infected every 15-20 seconds by WHO estimates, and yet Congress cut the budget for the National Institutes of Health by \$150 million. The United States now spends \$8 billion on biomedical research of all kinds, at a time when new strains of diseases are developing, and old ones, such as tuberculosis, are resurging. In the United States, over 75% of the victims live in poverty, yet evidence is ignored that links infection to such "environmental co-factors."

It is time to put an end to the insanity of handing out condoms as a cure-all to the worst plague the world has ever seen, and instead to demand the political leadership that will fight for the survival of the whole human race.