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JPRS Report

Epidemiology

AIDS

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Epidemiology AIDS

JPRS-TEP-91-003

CONTENTS

12 February 1991

[This EPIDEMIOLOGY report contains only material on AIDS. Other epidemiology topics will be covered in a later issue.]

SUB-SAHARAN AFRICA

ANGOLA

- Official AIDS Figures Announced [*Luanda JORNAL DE ANGOLA, 5 Dec 90*] 1

KENYA

- 'Alarming Rate' of AIDS Cases Reported in South Nyanza
[*Nairobi Domestic Service, 31 Jan 91*] 1

MADAGASCAR

- Bishops Criticize Use of Condoms [*Antananarivo MADAGASCAR TRIBUNE, 29 Nov 90*] 1

NAMIBIA

- Forty-two AIDS Deaths, 505 HIV Cases Since '85 [*Windhoek TIMES OF NAMIBIA, 5 Dec 90*] .. 2

NIGERIA

- Medical Association's 'Nonchalance' Toward AIDS Problem Cited
[*Laide Shokunbi; Lagos DAILY TIMES, 6 Nov 90*] 2
Britain Continues Grants for AIDS Program [*Paris AFP, 26 Jan 91*] 2

SENEGAL

- Since 1986, 425 AIDS Cases, 125 Deaths [*Aly Coulibaly; Dakar SUD HEBDO, 29 Nov 90*] 3
Since June 1990, 64 AIDS Cases Reported [*Dakar LE SOLEIL, 26 Nov 90*] 3
Twenty-Six AIDS Cases Identified in Louga Region
[*Cheikh Camara; Dakar LE SOLEIL, 11 Oct 90*] 4

SOUTH AFRICA

- Health Department Updates AIDS Statistics [*Johannesburg SOWETAN, 10 Jan 91*] 4
AIDS Care Cost Predicted Too High for State [*Johannesburg BEELD, 14 Nov 90*] 4
Interdepartmental Group Discusses AIDS Control Campaign
[*Johannesburg SABC TV 1 Network, 23 Jan 91*] 5
Bishops' Conference on Blame for Violence; AIDS [*Johannesburg SAPA, 23 Jan 91*] 5
Nonracial Resorts Adopt Anti-AIDS Measures
[*Andre du Plessis; Johannesburg BEELD, 19 Nov 90*] 5
AIDS Spreading Among White Teens
[*Ryan Cresswell; Johannesburg SUNDAY TIMES, 2 Dec 90*] 6
Blood Donors Found To Be AIDS Carriers
[*Mathatha Tsedu; Johannesburg SOWETAN, 20 Dec 90*] 7
Cape Hospitals Running Short of AZT [*Cape Town CAPE TIMES, 15 Dec 90*] 7
Advisory Group Releases Western Cape AIDS Figures
[*Glynnis Underhill; Cape Town CAPE TIMES, 7 Feb 91*] 7
AIDS Tests Reportedly Done Without Consent
[*Felicity Levine; Johannesburg SUNDAY TIMES, 13 Jan 91*] 8

SWAZILAND

- Epidemiologist Reports 3,000 HIV Carriers in Country
[Vusie Ginindza; Mbabane THE TIMES OF SWAZILAND, 17 Jan 91] 9

UGANDA

- Museveni Proposes 4-Point Battle Against AIDS
[Ndyakira Amooti; Kampala THE NEW VISION, 10 Jan 91] 9

ZAMBIA

- Seventeen AIDS Patients Since March in Chadiza [Lusaka TIMES OF ZAMBIA, 23 Nov 90] 10

EAST ASIA

HONG KONG

- Haemophiliacs Still Face Virus Threat
[Helen Signy; Hong Kong SOUTH CHINA MORNING POST, 19 Nov 90] 11

JAPAN

- Number of AIDS Cases Increasing [Tokyo KYODO, 29 Jan 91] 11

SOUTH KOREA

- Four Test HIV Positive for January [Seoul YONHAP, 1 Feb 91] 12

MALAYSIA

- Authorities Say AIDS Carriers Number More Than 12,000
[M. Thillinadan; Kuala Lumpur BERITA HARIAN, 2 Jan 91] 12

SINGAPORE

- Four More Infected With AIDS Virus [Singapore THE STRAITS TIMES, 25 Jan 91] 12

THAILAND

- Public Health Official on AIDS Situation
[Tunsathit Thapthim; Bangkok THE NATION, 1 Feb 91] 13
Surat Thani HIV Cases [Bangkok THE NATION, 10 Dec 90] 14

VIETNAM

- Anti-AIDS Programme in Ho Chi Minh City [Hanoi VNA, 23 Jan 91] 14
AIDS Scare Spurs Solution to Drug Problem [Leo Dobbs; Hong Kong AFP, 17 Jan 91] 14

EAST EUROPE

POLAND

- AIDS Drug To Appear 'This Year' [Warsaw RZECZPOSPOLITA, 16 Jan 91] 16

YUGOSLAVIA

- AIDS Commission Registers 174 Cases [Belgrade BORBA, 21 Jan 91] 16

LATIN AMERICA

BRAZIL

Over 15,000 Infected With the AIDS Virus [*Brasilia Domestic Service, 7 Feb 91*] 17

CUBA

AIDS Hospital Opens in Guantanamo, 18 Cases Reported
[*Havana Radio Reloj Network, 28 Jan 91*] 17

German Professor Contends AIDS Virus Created by Pentagon
[*Havana International Service, 24 Jan 91*] 17

DOMINICA

AIDS Committee Chairperson Outlines Priorities [*Bridgetown CANA, 6 Feb 91*] 17

HONDURAS

Sharp Increase in AIDS Predicted [*San Pedro Sula TIEMPO, 30 Nov 90*] 17

PERU

Health Ministry Reveals Deaths From AIDS Last Year
[*Lima RTP Television Network, 28 Jan 91*] 18

NEAR EAST & SOUTH ASIA

INDIA

More on Developments in Fight Against AIDS 19
Spread Into Gujarat [*Gautam Mehta; Bombay THE TIMES OF INDIA, 3 Dec 90*] 19
Plea From West Bengal [*Calcutta THE SUNDAY STATESMAN, 2 Dec 90*] 20
AIDS Control Plan, Statistics Told [*Madras THE HINDU, 26 Dec 90*] 20

ISRAEL

Spread of AIDS in 1990 Examined [*Ronit Morgenstern; Tel Aviv 'AL HAMISHMAR, 4 Dec 90*] .. 21

SOVIET UNION

Radio Reports Current Soviet AIDS Statistics [*Moscow Domestic Service, 24 Jan 91*] 24

WEST EUROPE

CANADA

AIDS Cases in Quebec, HIV Compensation Plan, Needle Exchange 25
Cases in Quebec, Nation [*Windsor THE WINDSOR STAR, 29 Nov 90*] 25
HIV Compensation Program
[*Beverly Smith; Toronto THE GLOBE AND MAIL, 14 Dec 90*] 25
Vancouver Needle Exchange [*Ottawa THE OTTAWA CITIZEN, 14 Dec 90*] 26

ITALY

Recent AIDS Study Discussed [*Gianna Milano; Milan PANORAMA, 16 Dec 90*] 26

ANGOLA

Official AIDS Figures Announced

91WE0167A Luanda JORNAL DE ANGOLA
in Portuguese 5 Dec 90 p 16

[Text] From 1985 through the first half of this year, 191 cases of Acquired Immune Deficiency Syndrome (AIDS) were reported in Angola, Martinho Sanches Epalanga, vice minister of health, said yesterday in Luanda.

Speaking at the opening of the exposition for World AIDS Day, celebrated Saturday, Epalanga said that 72.3 percent of the cases fell in the age bracket from 20 to 39 years and 42 percent were females.

"The Organization of Angolan Women (OMA) thus has a relevant and vital role in providing counseling and psychological support for HIV-positive individuals and AIDS patients," Epalanga said.

He added that the OMA has a role in offering suitable measures and education regarding the prevention of sexually transmitted diseases, including AIDS, and in mobilizing and organizing community groups focusing on women's health.

Elsa Montes, director of the program for AIDS prevention in Angola, said it was impossible to monitor the number of fatalities because the victims often die at home without ever having reported to a health unit.

She added that laboratories for AIDS analysis are being set up in Cabinda, Huila, Malange, Uige, Lunda-Norte, Huambo, and Benguela Provinces, in addition to the laboratory in Luanda Province.

On that occasion, Olivia Torre, a biologist in the AIDS referral laboratory, presented a draft bill to the vice minister of health for the creation of an independent, non-governmental association for struggle against AIDS.

The exposition, open to the public until 7 December in the Biblioteca Nacional, shows a wide variety of methods for preventing AIDS.

KENYA

'Alarming Rate' of AIDS Cases Reported in South Nyanza

EA3101180591 Nairobi Domestic Service in English
0600 GMT 31 Jan 91

[Text] There is an alarming rate of AIDS cases in South Nyanza [western Kenya] with a monthly average of 40 cases confirmed at the Homa Bay District Hospital alone. The hospital superintendent, Dr. Ambrose Misore, said that the recorded figures were a reflection that hundreds of other people had not presented their cases for screening and were knowingly spreading the virus. He said that South Nyanza with Kisumu were leading in

AIDS cases due to the region's proximity to neighboring countries where high incidents of the disease have been reported.

Dr. Misore disclosed this when he addressed an opening ceremony at an AIDS seminar organized by the national AIDS program in Homa Bay. The seminar was officially opened by the Nyanza provincial medical officer, Dr. Omolo, on behalf of the director of medical services, Professor Joseph Oliech.

MADAGASCAR

Bishops Criticize Use of Condoms

91WE0149A Antananarivo MADAGASCAR TRIBUNE
in French 29 Nov 90 p 3

[Article signed M.R.: "Fight Against AIDS: Madagascar's Bishops Criticize the Use of... Condoms..."]

[Text] The proliferation of AIDS and the ravages it makes in human societies have led authorities to look for effective solutions to curb the increasingly alarming spread of the disease. Throughout the world as well as in Madagascar, although the use of condoms as a means of protection against the disease that has been called the plague of the century (because it is incurable and fatal) may not be widespread, it is strongly recommended by the medical profession. That was also the case at the IHS [Social Hygiene Institute] workshops organized on four consecutive days last week.

In this respect, the IEC commission (Information, Education, and Communication) appealed to female prostitutes to report to the IHS to get free condoms. For similar reasons, high-risk women would have to submit to severe and strict controls. We even learned that, in the next few weeks, such "small equipment" against AIDS would be distributed free of charge in the vicinity of major thoroughfares, the objective being of course to alert public opinion to the dangers of this social scourge.

But, faced with this, religious-minded women went up in arms, and the Bishops Conference sounded the alarm against this abusive and immoral use of condoms. In the first part of their letter (published in LAKROA of 18 November 1990) to Public Health officials, they stated that AIDS is a function of the behavior of individuals in society. It would therefore be a mistake and evidence of immorality to let people believe that it is enough to use condoms to be protected against the disease. Rather, one should demand of the young and of adults that they learn to make the difference between pleasure and duty. Then AIDS would no longer be a matter of public health, but rather and far more a matter of compliance with accepted standards of good behavior.

Thus, they say, the promotion of condom use is just another way of debasing man, like other most humiliating precautions.... Finally, according to the bishops, the solution that should be advocated should rather

consist in sexual abstinence and chastity outside the conjugal sphere, and condoms should be used only by married couples when one or the other already has the disease. Beyond that, therefore, the church condemns the ineffectiveness of condoms and favors man and woman's deep sense of responsibility, which should be promoted above all.

The theory is defensible, if measured against an ideal yardstick. In reality, it may turn out to be utopian considering that man is made of flesh and blood and doomed to sin by nature. Therefore, far from encouraging evil, the use of condoms might help protect man against himself until the advent of a better society free from any "evil" influences. For the time being, this is the dream par excellence. All the same, the debate remains open, and it is the authorities' turn to play...now.

NAMIBIA

Forty-two AIDS Deaths, 505 HIV Cases Since '85
91WE0179A Windhoek TIMES OF NAMIBIA
in English 5 Dec 90 p 4

[Text] For the first time all over Namibia, women organisations came together on 1 December 1990 to commemorate World AIDS Day as an important starting point to organise themselves in the fight against AIDS and other issues.

"Women need to develop a language as to confidently negotiate about sex with their partners," Dr. Finkenstein, Manager of the National AIDS Control Programme (NACP) told women at a gathering on Saturday.

He stressed that women should highlight awareness of the risk of HIV infection and AIDS.

The events of the day focussed attention on the fact that AIDS touched the lives of millions of women all over the world.

The World Health Organisation (WHO) reported about 250,000 cases of AIDS from over 150 countries. WHO estimates there are about 700,000 cases worldwide and more than half the figure was made up of women.

AIDS therefore is a big social and economic challenge since so many women are infected with the virus.

Women are also further affected as they are mothers of AIDS infected children, partners of HIV-infected men, and by their role as health professionals, teachers, social workers, councillors, caretakers and community leaders.

He further urged women to strengthen AIDS prevention activities and programmes at all levels of society, and to promote respect and care for all HIV infected people, and people with AIDS.

In Namibia a total of 42 people have so far died from AIDS, while 505 people have been positively tested for the HIV virus.

The figures were registered from January 1985 to September 1990.

Deputy Minister Pendukeni Ithana also addressed the women, stressing that AIDS could be prevented but not cured.

"Protection is in our hands," she said.

She pointed out that AIDS was not only a health problem but also an economic and social problem.

"With a primary target population of adults aged 15-45, the country's work-force and most productive sector can be seriously affected," Ithana said.

NIGERIA

Medical Association's 'Nonchalance' Toward AIDS Problem Cited

91WE0151A Lagos DAILY TIMES in English
6 Nov 90 p 32

[Article by Laide Shokunbi, health correspondent]

[Text] United States based Nigerian AIDS researcher has warned of the possibility of the AIDS disease becoming a major national disaster as measures to contain its spread do not exist at present.

Dr. Kayode Adeniyi-Jones of the U.S. National Institute of Health in the state of Maryland made the observations during an interview, with the DAILY TIMES at the weekend.

He said the poor application of education on the deadly effects of the disease and the avoidable carelessness in cases relating to blood transfusion has given impetus to the spread of AIDS, thereby making its control difficult.

Adeniyi-Jones observed that the country could not afford to wait any moment longer as "the magnitude of the problem is beyond comprehension," and blamed the Nigerian Medical Association for nonchalance toward the problem.

He spoke of the need for massive education, wondering why Nigerians were unconcerned about a disease that has the potential to wipe out up to 25 percent of the country's population and cited Uganda, where one million of the 16 million population are reportedly infected with the AIDS virus as an instance of impending tragedy.

"If somebody came to invade us now, and had the potential to wipe out 25 percent, we would be rising up in arms," he said.

Britain Continues Grants for AIDS Program

AB2601201091 Paris AFP in English 0423 GMT
26 Jan 91

[Excerpt] Lagos, Jan 25 (AFP)—The United Kingdom has granted Nigeria 11 million pounds over the past two

years towards the West African nation's programme to fight Acquired Immune Deficiency Syndrome (AIDS), Britain's Minister for Overseas Development Mrs. Lynda Chalker said here Friddze made the statement while signing an agreement for a fresh 1.5 million pounds grant toward the Nigerian national AIDS prevention programme. Britain has contributed 70 million pounds towards fighting AIDS and is the world's third largest contributor to the World Health Organisation (WHO) programme, she said. Nigeria this year is planning to increase its AIDS screening centres from 21 to 32, said Minister of Finance and Economic Development, Alhaji Abubakar Alhaji. [Passage omitted].

SENEGAL

Since 1986, 425 AIDS Cases, 125 Deaths

*91WE0168A Dakar SUD HEBDO in French
29 Nov 90 p 9*

[Article by Aly Coulibaly: "The Problem Worsens"; first paragraph is SUD HEBDO introduction]

[Text] On 1 December the international community will hold the Third World Day of Struggle Against AIDS. For the 1990 meeting the theme adopted, "Women and AIDS," reflects the exponential growth of the AIDS epidemic among women. According to the WHO, more than 3 million women suffer from AIDS out of more than 8 million recorded cases. In many countries in Africa south of the Sahara and in the Caribbean the high incidence of AIDS among women leads to the infection of the newborn and a considerable level of infant mortality.

When the human system contacts the AIDS virus (HIV), it secretes antibodies that indicate the presence of the virus in the blood. Up to seven years may go by between initial infection and the terminal stage of AIDS (Acquired Immune Deficiency Syndrome). The Senegalese National Committee for the Prevention of AIDS established in 1987, is working to limit the damage. The committee includes a coordinating body and specialized groups. Already active are a group of blood donors, an education and health group, and a clinical group equipped to meet the medical, psychological, and social needs of those suffering from the disease. The latter group, headed by Professor Awa Marie Coll Seck, is caring for infected persons at Fann central hospital.

The group monitoring blood epidemiology, headed by Professor Souleymane Mboup, is charged with carrying out tests on sexually transmitted diseases (STD), infectious diseases, pregnant women, and other persons.

Between 1986 and November 1990, 425 persons were identified as suffering from AIDS, 125 of whom died, according to a statement by the Senegalese National Committee for the Prevention of AIDS. This situation is due to a real public health problem and a lack of education among the people. These facts are recognized

by Prof. Coll Seck, who states that enormous resources in all fields must be made available to halt this scourge quickly.

These concerns are justified by figures published in June 1990 on the prevalence of AIDS in Senegal. The results of research have proved that 0.3 percent of blood donors are HIV positive, compared to 7.0 percent in Ivory Coast. About 1.2 percent of all pregnant women in Senegal are HIV infected, compared to 10 to 12 percent in Zaire. In Senegal 6 percent of sick persons carry the virus, compared to 70 to 80 percent in Ivory Coast or in Zaire. In Senegal about 4.6 percent of those suffering from tuberculosis and 2.4 percent of those suffering from STD have AIDS. The incidence of AIDS is increasing among prostitutes, affecting 15 percent of the total number in Senegal, compared to 80 to 90 percent in Burundi and Kenya. Within Senegal some studies have demonstrated that 30 percent of the prostitutes in Ziguinchor and 37.8 percent of the prostitutes in Kaolack are HIV positive. The incidence is greater in the southern part of Senegal. When they look at the figures from other countries, many Senegalese think that there is no danger in delaying action. Prof. Awa Marie Coll Seck, from Fann central hospital, has emphasized: "If proper advice had been followed in those countries, we would not be in the present situation. In view of the increase in the incidence of AIDS in Senegal we should take immediate action."

AIDS has become the principal cause of death among women between 20 and 40 years of age in the large cities of Europe, America, and Africa south of the Sahara. It is estimated that during the decade of the 1990's AIDS will kill between 1.5 and 3 million women. Aware of this impending disaster, which hangs like a sword of Damocles over the heads of a substantial proportion of the female population, the SWAA (Society for Women and Mothers Helpers in Africa) is sponsoring a benefit performance, the income from which will help to care for HIV-infected persons and orphans whose parents died from AIDS. The program will be held on 30 November in Sorano.

Since June 1990, 64 AIDS Cases Reported

*91WE0168B Dakar LE SOLEIL in French
26 Nov 90 p 2*

[Text] In a statement issued on 24 November the Senegalese National Committee for the Prevention of AIDS announced that 425 persons had been diagnosed in Senegalese hospitals as suffering from AIDS, 125 of whom died.

As of the end of June, 361 cases had been identified, and 64 new cases have since been added to the total. AIDS has become a real, public health problem. The blood epidemiological situation is being followed very closely elsewhere in the country, under the program based on

the network of monitoring stations in Dakar, Ziguinchor, Thies, Kaolack, and Saint-Louis, supervised by the bacteriological and virological laboratories of the Aristides Le Dantec Hospital.

Twenty-Six AIDS Cases Identified in Louga Region

*91WE0168C Dakar LE SOLEIL in French
11 Oct 90 p 8*

[Commentary by Cheikh Camara: "AIDS: 26 Cases Identified"]

[Text] In May 1990 26 AIDS cases were recorded in the Louga region. As in other areas of the country, the rate is increasing. It is feared that the figure is far from reflecting reality because it includes only a small portion of the cases identified. Therefore, the only way to slow down the spread of this illness, in the absence of effective medicine or vaccination, is education and making people aware of the need to change their behavior.

This was the reason for the recent holding of a seminar for 28 regional and departmental program supervisors and officials of regional hospitals and epidemiological services. The seminar was a part of the program for the prevention of sexually transmitted diseases (STD) and AIDS.

Other training programs are scheduled in the various departments of the country for local administrative and health officials. Also under preparation is an expansion in the program of making the people aware of this problem at sports, cultural, and artistic events.

The seminar was the occasion for Governor Souleymane Bovo Vilane, who presided over its opening session, to recall the health policy of the government before emphasizing the purpose of the seminar and the need to inform and train health personnel. In itself this is an essential stage in the struggle against these evils. Above all, in Governor Vilane's view, the emphasis must be placed on sensitizing, informing, and educating the people. This view was shared by regional officials in the fields of health education and the struggle against STD and AIDS.

In May 1990 Fatou Thioub and Nafissatou Aidara attended an AIDS information, communications and education program at Santa Guzane [as published—St. Augustine?], in the United States. In the view of these two women it is necessary to provide objective information on the threat constituted by STD and AIDS, the means of transmitting these diseases, as well as the resources available to prevent their spread.

Those attending the three-day seminar sought to cover all aspects of the problems concerning STD and AIDS, including epidemiological and risk factors, treatment, and prevention.

SOUTH AFRICA

Health Department Updates AIDS Statistics

*91WE0196A Johannesburg SOWETAN in English
10 Jan 91 p 9*

[Text] Eight more people died of AIDS and 39 more were recorded to have developed the disease over an 11-day period last month, according to the latest update supplied by the Department of National Health and Population Development.

The department's information is based on data supplied by the South African Institute for Medical Research. In December last year, two updates were issued—on 3 December and 14 December.

According to the 14 December update, 613 people now have AIDS in comparison with 574 on 3 December. The number of deaths increased from 262 to 270.

The incidence of AIDS among children aged nine and younger has increased by 7 from 74 to 81, while the incidence of the 10- to 19-year-old group remained static at 16 over the eleven-day period.

About 16 percent of the total number of reported AIDS cases are 19 years or younger.

The recent increase in the incidence of AIDS among the heterosexual community is continuing, according to the figures.

Women

Women now account for 152 cases of the total and men for 459 as opposed to 139 and 434 respectively in the previous update.

The gender of two cases is not known.

The largest number of people with AIDS live in the Johannesburg area—211—of which more than half, 124, have died. Durban has recorded 90 cases (and 21 deaths), Cape Town 86 (46 deaths) and KwaZulu 32 (no deaths recorded).

AIDS Care Cost Predicted Too High for State

*91AF0380Z Johannesburg BEELD in Afrikaans
14 Nov 90 p 18*

[Article by correspondent: "AIDS Patients Too Expensive for South Africa"]

[Text] Capetown—South Africa will not be able to afford the cost of treatment and care for all its dying AIDS patients in hospitals and state institutions.

It has been estimated that within a few years, the treatment and care of AIDS patients will cost 80 billion rand per year, and South Africa does not have the monetary resources to spend such amounts on AIDS,

Mr. Edward Osborne, an economist from Nedbank, said yesterday at a business symposium in Capetown.

South Africa cannot spend 80 billion rand per year on the care of AIDS patients. The dying patients will simply have to be cared for at home.

Professor Christa van Wyk, a member of the law faculty at UNISA [University of South Africa], said that employers and trade unions can no longer deny the existence and danger of AIDS. Every employer should have an AIDS policy.

This policy should include directives on AIDS education, AIDS testing, and the employment of workers, as well as on how to deal with workers who are AIDS carriers or AIDS patients.

Trade unions should be involved in drawing up directives for that policy.

Interdepartmental Group Discusses AIDS Control Campaign

MB2401081791 Johannesburg SABC TV 1 Network in Afrikaans 1800 GMT 23 Jan 91

[Text] Between 100,000 and 300,000 people in South Africa already carry the virus which can lead to AIDS. These shocking figures were revealed in Cape Town today during the first interdepartmental meeting to discuss the control of AIDS.

Sixteen state departments, the various provinces, and own affairs authorities are to be involved in an information campaign planned for this year. A workshop for counsellors is also planned. [Begin video recording] **Reporter Ossie Gibson:** Committee Chairman Dr. Coen Slabber said at a news conference that the campaign against AIDS in South Africa can only succeed if there are changes in attitudes and patterns of behavior. Children are viewed as an important target group, for their sexual behavioral patterns are yet to be formed.

Dr. Manda Holmshaw, spokesperson for the Department of National Health and Welfare: The program to be researched this year will be for high schools, but ideally we would rather begin with primary school pupils. I have a 5-year-old son, and he knows everything about AIDS. It is possible to feed information to children, and it is also possible to teach them how to use that information. If this year's program succeeds, we could work on a similar program for primary schools next year.

Gibson: The U.S. health secretary recently said he would like to provide financial assistance to both government and community organizations. Your comment?

Dr. Manda Holmshaw: We are very pleased that South Africa might receive money to help in the control of AIDS. I believe everyone realizes that we will achieve nothing unless there is cooperation among nongovernmental organizations, community organizations, and people from all political backgrounds. We all have to

work together. We have a common goal, and that ought to be the most important factor, rather than our backgrounds. We ask for cooperation and invite all these groups to speak with us. We want to work with them. [end recording]

Bishops' Conference on Blame for Violence; AIDS

MB2301052091 Johannesburg SAPA in English 0024 GMT 23 Jan 91

[Embargoed by SAPA until 1900 GMT 23 January]

[Excerpt] Pretoria Jan 22 SAPA—[passage omitted] Discussing AIDS, Bishop Napier said prayer and fasting would be needed to cast out this demon.

He called for the "resumption of the moral discipline of the Gospel and the ethical practices to be found in our indigenous cultures".

A church spokesman confirmed on Tuesday the Pope had not yet sanctioned the use of condoms to fight AIDS, adding that their efficiency was suspect.

Nonracial Resorts Adopt Anti-AIDS Measures

91AF0375Z Johannesburg BEELD in Afrikaans 19 Nov 90 p 1

[Article by Andre du Plessis: "Plan Against AIDS in These Resorts: Numerous Measures Implemented After Opening Up"]

[Text] Far-reaching steps to protect vacationers at Overvaal resorts against AIDS, among other things, and stronger measures to ensure their safety after the recent opening up of public facilities to all races were unveiled over the weekend in Boksburg.

At the same time, the wind was taken out of rumors to the effect that white vacationers are being crowded out by nonwhites at the resorts. Figures contradict these allegations, and at the best-known resorts, such as Tshipise, Eiland, and Sybrand van Niekerk, the total number of nonwhite visitors changed in more than one month from none to only six.

Mr. Koos Snyman, Administration-House of Assembly, and Mr. Rudi Basson, spokesman for the Overvaal resorts, informed the annual congress of the South African Recreational Vehicle Association (SAWA) about this on Saturday.

Mr. Basson spoke on safety and health at Overvaal resorts. Among these measures are:

- Continuous treatment with chlorine gas in order to rule out any possibility of AIDS contamination;
- Extremely costly treatment of swimming pool water with ozone;
- Weekly testing of resort water by the CSIR [Council for Scientific and Industrial Research];

- No visitors to an Overvaal resort will be permitted in the water without a foot bath and a shower; and
- Stricter enforcement of the deadline by which day visitors must leave a resort.

There is no better decontaminating agent for water than ozone. This is a very expensive process, but it is being applied in cooperation with the CSIR, Mr. Basson said.

Water samples from all resorts are sent to the CSIR on a weekly basis. "It is even tested for things that have never even appeared yet."

"There is no proof that AIDS can be transmitted by water. If the AIDS virus ends up in our swimming pool water, it will be destroyed automatically," Mr. Basson said in response to a question.

Rumors of crowding by nonwhites have their origin in "people who do not come to relax, but rather abuse the opportunity to engage in politics."

Recent allegations that white vacationers at the Sybrand van Niekerk resort actually could not get into the swimming pools due to crowding are totally false, Mr. Basson said.

"Not a single nonwhite has visited that resort since the opening up to all races. Every day, we get phone calls from people who have reserved places for the December vacation and are now concerned about this.

"They usually heard from a sister or someone that you can barely move at Tshipise, for example, that whites are allegedly being trampled on.

"Since the opening up of our resorts, there have only been six nonwhites at Tshipise. Four nonwhites have visited Eiland," Mr. Basson said.

And at Warmbad, there are between 30 and 70 nonwhites on weekends. "These are people who behave especially well and try to fit in with the other vacationers," Mr. Basson said.

All accommodations, aside from a number of parking sites for recreational vehicles, are already booked for December. Not one of those reservations is for nonwhites, Mr. Basson said.

"There is no intimidation going on. Such rumors must be rejected with the contempt they deserve," Mr. Basson said.

Some people feel that the current and planned construction of more fences, gates, and control points is "unnecessarily irritating."

However, this is not in order to discriminate against people, but rather to have control over facilities so that visitors of all population groups can enjoy the greatest amount of safety.

Much stronger action will be taken against anyone whose behavior is "socially unacceptable," Mr. Basson said.

AIDS Spreading Among White Teens

91WE0155A Johannesburg SUNDAY TIMES
in English 2 Dec 90 p 13

[Article by Ryan Cresswell: "Scores of Teenagers Are Carriers of AIDS"]

[Text] AIDS is spreading among white schoolchildren because they are largely ignoring the threat of the disease, health officials warned this week.

The warning came after Liz Towell, manager of the AIDS Training and Information Centre in Durban, disclosed that a white, 17-year-old schoolgirl from a top school had been confirmed HIV positive.

Mrs. Towell said she had also personally counselled many recent school leavers who had been HIV infected while at school.

She said one girl from a top school needed counselling because she was afraid she had contracted AIDS from one of five sexual partners. Experts believe the girl's sexual behavior is not the exception.

A Cape Town doctor said he was sure there were "scores" of schoolchildren in Johannesburg, Durban and Cape Town who were HIV-positive.

"There are no exact figures available for schoolchildren, but it's more than reasonable to assume that scores of children are infected with the HIV virus in the main cities," he said.

"Perhaps even smaller towns have this problem.

Active

"Teenagers are increasingly sexually active and statistics have shown there is a very low level of AIDS awareness among them," said the community health specialist.

Dr. Steve Knight a member of the Natal AIDS Working Committee and the Progressive Primary Health Care Group, said teenagers were not curtailing their sexual activities because of the AIDS threat.

"Fear tactics and sensational figures will not help us here," he said.

"Until we get into the classrooms to pass on knowledge and statistics about AIDS, and unless we teach schoolchildren how to cope with AIDS, we are not going to succeed in the fight."

Risk

"Adolescents do not really perceive AIDS as a personal threat. The interesting thing about the disclosure of the 17-year-old schoolgirl is that girls are particularly at risk.

"Their friends are usually older. There is a lot of sugar-daddy going on, especially in the black community."

Yesterday was World AIDS Day and this year the day focussed attention on "Women and AIDS."

Mrs. Simone Baverey, Durban director of the Family and Marriage Society of SA (Famsa), said her staff recently counselled a couple whose marriage was breaking up because one of the partners was HIV positive.

"I am sure we are going to get many more cases like this," she said.

Blood Donors Found To Be AIDS Carriers

*91WE0155B Johannesburg SOWETAN in English
20 Dec 90 pp 1-2*

[Article by Mathatha Tsedu: "Blood Donors in AIDS Scare"]

[Text] Twenty Northern Transvaal blood donors were found to be carrying the AIDS virus during the 3 months ended in September, the South African Institute of Medical Research, said this week.

The head of the SAIMR in Pietersburg, Dr. MGA Forrest, said the figure covered the entire region, including the bantustans.

He said the AIDS epidemic was in its infancy in the region, but was increasing.

Statistics for the period up to 31 December would be released in January next year, he said.

Meanwhile, the AIDS counselling centre in the town said that only one person was known to have full-blown AIDS in the area.

Two other people had died of the disease, Centre Director Mr. H.E. Smith said.

Smith said there were no statistics for people found to be HIV positive.

The University of the North was, however, conducting a study which should help in putting the information together.

The study should be completed in January, he said.

Smith said statistics of AIDS-infected people showed that the disease was spreading rapidly through heterosexual intercourse among black people.

While 251 of the 287 white AIDS sufferers were infected through homosexual means, 185 of the 265 blacks were infected heterosexually.

The heterosexual transmission of the disease has led to 71 children under 9 years old having the AIDS virus.

Only two black homosexual cases had been noted, Smith said.

Among whites, only 11 people had been infected heterosexually while 13 got the virus through blood donors.

Eleven others are haemophiliacs while one was a drug user.

Cape Hospitals Running Short of AZT

*91WE0169A Cape Town CAPE TIMES in English
15 Dec 90 p 3*

[Text] Cape provincial hospitals have a shortage of the drug AZT (Zidovudine) used in the treatment of AIDS because there is no money to buy more, said Dr. Frank Spracklen, head of a city AIDS clinic.

Only 14 people infected with the HIV virus are being supplied with AZT at Dr. Spracklen's clinic, 13 are buying it themselves and more than 600 are not getting it at all.

Commenting on claims that doctors and health workers are using the drug as a preventative measure after needle pricks, Dr. Spracklen said there was no evidence that AZT prevented AIDS. It merely delayed the onset of full-blown AIDS, he said.

Yesterday there was widespread reaction from doctors on inadequate protection against AIDS at hospitals, following a report that a Groote Schuur nurse was being treated with AZT after pricking herself with an infected needle.

Professor Peter Folb of UCT medical school's department of pharmacology said it was standard hospital procedure to treat health workers who received needle pricks with AZT until the source patient was found to be HIV positive.

Prof. Joseph Ozinsky, associate professor of anaesthetics at Groote Schuur said, "It was a sad state of affairs that doctors and nurses are at great risk."

Groote Schuur doctors who called the Cape Times yesterday said not enough safety measures were used and safety spectacles which presented "splash infection" were not provided.

Dr. R.M. Pelteret, a Groote Schuur superintendent, said the hospital was concerned for staff safety and a "formal needle-stick injury policy" was applied. This policy included the use of AZT.

Safety spectacles were available for use by staff in all "very high-risk areas," he said.

Advisory Group Releases Western Cape AIDS Figures

*MB1102085991 Cape Town CAPE TIMES in English
7 Feb 91 p 1*

[Report by Glynnis Underhill: "Cape AIDS Shock"]

[Text] The number of black people in the Western Cape infected with the AIDS-related HIV virus trebled in 1990.

This shock statistic, which reflects a rapid spread of the virus among heterosexual people, was revealed yesterday by the Western Province AIDS Advisory Group.

And figures released yesterday by the University of Cape Town virology department also show that there are now 771 HIV-positive cases in the Western Cape.

Leading AIDS experts believe that these recorded statistics, compiled from requested testing at Cape laboratories, reveal only one-tenth of the actual figure.

The Western Cape statistics disclosed yesterday reveal:

- Twelve mothers have passed the virus on to their babies.
- More heterosexual are being infected than homosexuals.
- The growth rate of the disease is small in the white population and mostly among homosexuals—but escalates among the black heterosexual population.
- The level of growth of the virus among the black population has risen dramatically over the last two years.
- For more than half of the cases there is no recorded data.

In 1990 there were only 30 new HIV-positive cases recorded among the white community, but the figures for the black population increased from 75 HIV-positive cases in 1989 to 225 in 1990.

The 771 HIV-positive cases for the Western Cape can be broken down into: 142 heterosexual, 153 homosexual, 25 bisexual, 12 mother to child, 1 intravenous-drug abuser, 22 haemophiliacs, four prostitutes, 412 unknown risk.

According to a leading virologist at the University of Cape Town, who asked not to be named, the transmission of the HIV-positive virus among heterosexuals in the Western Cape in the last year is on the increase.

“The figures are absolutely frightening—but as forecast,” he said.

He added that in both the coloured and black communities, the infection-spread rate now had a doubling time of less than a year.

“But Cape Town is still geographically remote and there is still time to do something about the disease spread.”

A leading AIDS expert, who also asked not to be named because of the sensitivity of the subject, said the figures were “not surprising”.

“But these figures are artificial and give no idea of what is really happening out there.”

He said the lack of data on the recorded cases was “shocking” in itself.

“There is a serious gap in the knowledge that is being collected. More than half of the cases, we don’t know anything about,” he said.

—The latest Department of Health and Population Development figures state that 574 full-blown AIDS cases have been recorded in South Africa.

AIDS Tests Reportedly Done Without Consent

91WE0196B Johannesburg SUNDAY TIMES
in English 13 Jan 91 p 3

[Article by Felicity Levine]

[Text] Doctors at provincial hospitals in the PWV are openly defying a ban on testing patients for AIDS without their consent.

The doctors’ actions are in conflict with the rulings of the Transvaal Provincial Administration—but medical staff are prepared to face disciplinary action rather than risk infection.

“It is not just in our interest to do tests before surgery, but also in the patient’s,” said Professor Einhard Erken, head of orthopaedic surgery at the Wits University Medical School.

“A patient with AIDS has a slim chance of surviving some surgical procedures, because diminished immunity is a sure recipe for post-operative infection.”

Professor Erken said all surgical patients at the Johannesburg Hospital had been “routinely” tested for AIDS for the past six months.

“Patients are asked to give written consent for the test and, so far, no one has refused that I am aware of. If they did refuse, staff would probably refuse to carry out the surgery.”

Safer

But at the biggest hospital in the southern hemisphere, Baragwanath in Soweto, AIDS tests are carried out without the formality of a patient’s consent.

“Consent is irrelevant when it comes to operating on a patient who could have AIDS,” said the hospital’s surgical chief, Bokkie Rabinowitz.

“In many cases, patients admitted to Bara are in no state to sign consent forms, and they could die while we were trying to track down their next of kin.

“For us, it’s simply safer to go ahead and do the test.”

Bara makes use of a “quickie” AIDS test, which takes 10 minutes and costs the TPA R12.

The hospital is firmly committed to an eight-point guideline drawn up by Professor Erken on the handling of AIDS patients.

The document has been distributed to all departments at both Bara and the Johannesburg Hospital, and has also been sent to hospitals throughout the country.

Professor Erken has advised hospital staff to display pamphlets and posters containing the guidelines prominently in waiting rooms, operating theatres and casualty departments, rather than treating them as "confidential."

The guidelines state that:

- Patients due for an orthopaedic operation should be tested for HIV infection with the patient's consent, and that patients who refuse to be tested should be treated as HIV positive.
- The principle of "no-test-no-op" should be applied.
- No colleague should be forced to operate on an HIV-positive patient.
- Emergencies such as open fractures or acute sepsis in HIV-positive patients should be handled with only absolutely necessary surgical procedures.
- HIV-positive patients should not be treated with orthopaedic implants (total joints, plates, screws) because of the increased risk of post-operative complications.

Unethical

Despite the fact that several nurses and doctors at provincial hospitals are known to have contracted AIDS from patients, the TPA has slammed the practice of testing for the killer virus without a patient's consent or prior knowledge as "unethical."

A spokesman for the TPA's directorate of hospital services said: "We do not condone AIDS tests without the patient's consent."

He also said it was "too expensive" to do routine AIDS tests before every operation.

"In any event, a negative test is not conclusive," he said.

"The 'window period' of AIDS means that a patient may already have the virus, although it will not show up for several weeks. In such cases, a test is of no use to the medical staff."

He would not comment on whether or not medical staff doing tests without consent would face disciplinary action.

SWAZILAND

Epidemiologist Reports 3,000 HIV Carriers in Country

MB1701101991 Mbabane THE TIMES OF SWAZILAND in English 17 Jan 91 p 24

[Report by Vusie Ginindza: "3,000 Are HIV Positive"]

[Text] At least 3,000 people in the country are believed to be carriers of HIV, the virus which gives rise to AIDS, according to the epidemiologist in the AIDS Section, Mrs. Wazi Dlamini.

She said that research had revealed that for every fully blown AIDS case confirmed in the kingdom, there were at least a hundred cases of HIV carriers, walking around.

Presently, Mrs. Dlamini said that AIDS sufferers have been confirmed which means that an estimated 3,000 people now have the virus which will eventually deteriorate into full AIDS cases.

Mrs. Dlamini pointed out however that a comprehensive nationwide survey has not been carried out to determine the true extent of the prevalence of the disease, and that the available figures are therefore based on general research.

She stated that this figure might even be less than the actual number of cases, taking into consideration that some people die in their homes without coming to hospital.

Mrs. Dlamini said the most frightening fact is that people who are HIV never know that they are carrying the disease, and continue passing it on, until they fall sick and die.

She said that the department could not rely on a survey that was conducted late last year which indicated an AIDS prevalence of 2.85 percent of the numbers of people tested, because of the short length of time in which it was conducted.

However, she said, the general assumption is that one to two percent of the total population has AIDS. This would suggest that there is presently more than 10,000 HIV carriers.

In a research report that she presented in an AIDS seminar at the Mountain Inn this week, Mrs. Dlamini stated that the most affected age groups range between 12 and 40 years.

UGANDA

Museveni Proposes 4-Point Battle Against AIDS

91WE0183 Kampala THE NEW VISION in English 10 Jan 91 pp 1, 12

[Article by Ndyakira Amooti]

[Excerpts] President Museveni has suggested four measures to tackle the AIDS problem. These include: prevention of further infection, caring for the children

orphaned by AIDS, manufacturing clinical equipment such as syringes and gloves and prolonging the life of those already affected by the disease.

Mr. Museveni made the suggestions yesterday at the opening of an Oral Rehydration Salts (ORS) plant at Bweyogerere near Kampala. The plant is part of Mediphram Factory that produces several pharmaceutical products.

The President called for intensification of health education for the ordinary people to understand the AIDS disease. "We need to continue informing and sensitizing the people," he said.

He said part of the cause for the rampant spread of the disease in Africa is ignorance on the part of the masses who go to the extent of attributing the disease to witchcraft.

He said that it had also been discovered that the spread of AIDS was being accelerated by the prevalence of other sexually transmitted diseases (STDs). Mr. Museveni said that there should be mass treatment of STDs, adding they are a major factor in the spread of AIDS.

On the problem of children orphaned by AIDS, the President said their crucial need was free education, adding that, "in that way we shall be able to guarantee their future." But, he pointed out, the country could not currently provide free education to all children of school-going age because of financial constraints.

Mr. Museveni further suggested that those orphaned by AIDS should be provided with what he called "an agricultural credit" to help them start life when they leave school. He also said ways should be found to induce families to take on orphans so that "we do not end up building institutional homes for orphans."

ZAMBIA

Seventeen AIDS Patients Since March in Chadiza

91AF0487A Lusaka *TIMES OF ZAMBIA* in English
23 Nov 90 p 7

[Text] AIDS cases in Chadiza where 17 have been confirmed since March have alarmed health officials there who say the figure might just be a tip of the iceberg.

Clinical officer-in-charge of the sexually transmitted disease (STD) clinic in the district Mr. Francis Muchayanshimbi said a number of people suspected to have the disease had their samples taken to an AIDS screening centre for confirmation. The results from the centre might raise the current figure.

He said people had been coming to the STD clinic since it was opened in February.

"We have 17 confirmed AIDS cases in Chadiza district alone since March and this is alarming for a small town like this. We just buried an AIDS victim the other day," he said.

Mr. Muchayanshimbi said the problem was difficult to control because there was no community health education on AIDS and family planning in the district and surrounding villages, most of whom are on the border with Mozambique and Malawi.

He also cited lack of transport and inertia from some senior officials in the district as serious set-backs in bringing awareness to the people about the disease.

Villagers were difficult to control because of alleged promiscuity in these areas coupled with a lot of movement among the people.

"You can't tell these people to use condoms because many of them don't even know what it looks like in the first place," Mr. Muchayanshimbi said.

He had drawn up programmes to form AIDS committees in the district and villages and hold health talks with them, but these had not been approved.

"I am told there is no transport yet there are trucks going in the same direction for other business. I have tried to ask if I could accompany these officers so that I could hold talks with the community but even this has not been fruitful," he said.

HONG KONG

Haemophiliacs Still Face Virus Threat

91WE0190 Hong Kong SOUTH CHINA MORNING
POST in English 19 Nov 90 p 8

[Article by Helen Signy]

[Text] Local haemophiliacs still live in fear of catching AIDS from the blood products they use to stay alive, according to one of the 60 members of the Hong Kong Haemophilia Association.

The haemophiliac, who asked not to be named, said there was still a risk of catching the HIV virus from blood products used to replace the missing coagulant factors in their blood.

Haemophiliacs, who make up the second largest group of AIDS victims in Hong Kong, have also suffered from social stigma, to the extent that they could lose their jobs after the discovery of the disease, he said.

"Yes, it worries me. Most of the patients are worried about this—they are concerned, but what can we do?" he said.

"We can never know how great the risk is—the bottle is in front of you and you have to decide whether this bottle is infected or not."

"If we don't inject the blood product, we will die or damage our joints and experience pain and many other complications."

Many haemophiliacs have regular AIDS tests but cannot be sure they will not contract the disease each time they use the blood product.

"Once I know my test is negative I'm very happy, but there is no guarantee I won't contract the disease, because we go on using blood products and the risk is always there," he added.

Haemophilia, a hereditary male disease, means victims do not have normal clotting agents in their blood, and can bleed to death unless the coagulant is replaced.

They were once forced to have monthly blood transfusions, but now they can usually simply inject themselves with a blood product to replace the missing coagulant once they start to bleed.

Head of the government AIDS counselling and health education unit, Dr. Patrick Li Chung-ki, said that although the risk of commercial blood products containing the HIV virus was virtually non-existent, there was no 100 percent guarantee they were AIDS-free.

"I think we are looking at a risk which is very low now...you cannot say there is 100 percent safety," Dr. Li said.

He said manufacturers of blood products had stringent selection criteria for donors, screened all products for the HIV virus, and used heat or chemical treatment to further eliminate the risk.

Nearly all blood products used by haemophiliacs are imported from the U.S.

Research was also being conducted into synthetic blood products for haemophiliacs, although they were not yet available on the market, Dr. Li added.

About one third of all haemophiliacs tested for AIDS by the Government have proved positive, although all contracted the disease before blood screening was introduced in 1985.

There are currently 54 haemophiliacs registered as carrying the HIV virus, making them the second largest group to be affected after homosexuals, while five haemophiliacs have developed full-blown AIDS. More than 20 child haemophiliacs have been infected.

The number of haemophiliacs who had contracted AIDS had increased social prejudice, the haemophiliac said.

"People think you have a disease—especially a hereditary and incurable disease—and have mixed feelings.

"Now there's AIDS, another addition to such a feeling. I appreciate the stigma and because of that I don't actively and directly tell my friends that I'm a haemophiliac," he said.

Most haemophiliacs did not tell their employers about their condition, as some had lost their jobs because of it, while it was rare to find employment if prospective employers found out, he added.

JAPAN

Number of AIDS Cases Increasing

OW3001004091 Tokyo KYODO in English 1513 GMT
29 Jan 91

[Text] Tokyo, Jan 29, KYODO—The total number in 1990 of newly confirmed patients with AIDS (acquired immunodeficiency syndrome) or with the human immunodeficiency virus (HIV) hit 97, 10 more than the previous year, the government's AIDS Surveillance Committee said Tuesday.

The figure does not include cases caused by contamination from blood products.

Among the newly detected cases were three involving contamination of a mother and child, the first in Japan.

This brings the total of such cases in Japan since 1985 to 316, including 236 males and 79 females and one bisexual.

The figures show that the number of cases last year involving males dropped marginally by two, while the

number of foreign females affected rose four-fold to 18, mostly because of sexual contact with males.

An analysis of detailed figures kept since enactment of the AIDS prevention law in February 1989 shows that of 176 persons affected with the virus, males make up 72.7 percent and females make up 27.3 percent.

If cases stemming from contamination from blood products are added to those which result from sexual contact, the number of patients reaches 371, while the number of people with HIV is 1,627.

AIDS Surveillance Committee Chief Yuichi Shiokawa said regional areas of the country are now reporting more AIDS cases.

The risk of foreign women in Japan contracting AIDS is also growing, he said.

A special AIDS Liaison Committee consisting of representatives from relevant ministries will be formed next month, he added.

SOUTH KOREA

Four Test HIV Positive for January

SK0102025691 Seoul YONHAP in English 0230 GMT
1 Feb 91

[Text] Seoul, Feb 1 (YONHAP)—The Health and Social Affairs Ministry said Friday that four Koreans tested HIV positive in January.

Two contracted the human immunodeficiency virus that causes AIDS while working overseas, and two by unknown means.

This brought the number of Koreans who have contracted AIDS to 131. Of them, five are dead and one went abroad for treatment.

MALAYSIA

Authorities Say AIDS Carriers Number More Than 12,000

91WE0171A Kuala Lumpur BERITA HARIAN
in Malay 2 Jan 91 p 1

[Article by M. Thillinadan]

[Text] Kuala Lumpur, 1 Jan—The Special Antidrug Task Force of the National Security Council suspects that there are more than 12,000 carriers of the AIDS virus (HIV) in this country.

Zainuddin Abdul Bahari, director of the task force, said there are now 500 known carriers of the AIDS virus.

“This number does not reflect the true situation in the country and is believed to be much lower than the true figure,” he told BERITA HARIAN.

“The actual number may reach 12,000 if we consider the number of drug users in the country,” he said.

He said the 500 carriers were discovered through tests on almost 15,000 drug users at treatment centers, rehabilitation centers, and prisons.

“We believe the actual number of AIDS virus carriers outside prison and rehabilitation centers is greater than the number we know about,” he said.

At this time, he said, more than 100,000 drug users have been identified in the country. Of these, 80 percent smoke drugs, and 10 percent use injections.

Zainuddin said that a drug user who has become an AIDS virus carrier can easily pass the virus to another user by reuse of needles.

Because of this, he believes that the actual number of AIDS virus carriers is much larger than the number of those already identified.

“There is a big chance that a drug user who uses needles will get the AIDS virus. The virus is also easily transmitted through homosexual relations.

“The transmission of the virus by homosexuals usually occurs in prisons, and this has become a big problem in some of the advanced countries,” he said.

He stated that the same situation could occur among prisoners in this country's jails if immediate steps are not taken to prevent it. So far, 47 prisoners in Malaysia have been confirmed as AIDS virus carriers.

Zainuddin said that the most effective ways to control the number of carriers are isolation, education, and supervision.

SINGAPORE

Four More Infected With AIDS Virus

BK2501121291 Singapore THE STRAITS TIMES
in English 25 Jan 91 p 26

[Text] Four more Singaporean men were found infected with the AIDS virus in November and December last year, said a Health Ministry statement yesterday.

The men, who are from 19 to 38 years old, are believed to have been infected through sexual contacts, both here and abroad.

Two other Singaporean men died of AIDS-related illnesses during this period. They were previously found to be infected by the human immuno-deficiency (HIV) virus which causes AIDS.

So far, 61 Singaporeans have been found to be infected with the virus.

This includes 23 AIDS cases, of whom 15 have died, one case with AIDS-related complex and 37 asymptomatic carriers.

Last year, there were 17 newly-diagnosed infected Singaporeans, the highest number in a year since 1985.

In the past two months, a prostitute from a neighbouring country, arrested while working here, was found to be infected with HIV. She was counselled and sent home.

So far, seven foreign prostitutes have been found HIV-positive.

The Health Ministry was also notified of 70 cases of infectious syphilis and 566 cases of gonorrhoea in November and December compared to 42 and 665 respectively for the same period in 1989.

The ministry strongly advises the public to refrain from unprotected sex with prostitutes or with casual contacts, both locally and abroad.

THAILAND

Public Health Official on AIDS Situation

BK0102044591 Bangkok THE NATION in English
1 Feb 91 p A3

[Article by Tunsathit Thapthim]

[Text] More than 300 Thais have died of AIDS, about one percent of the total 25,000 people found infected, but a senior public health official says the AIDS situation here seems to have stabilized.

Dr. Thira Ramasut, director general of the Communicable Diseases Control Department, said AIDS has killed 307 people and the death toll is expected to rise quickly in the future as many of the 25,242 infected people have developed symptoms.

AIDS researchers have consistently argued that the number of people testing positive for AIDS is very misleading because it does not reflect the high prevalence rates in random samples of the general population.

They say that rates of infection are more important.

For example, more than 50 percent of prostitutes in some areas are carrying AIDS, while one in ten rural men between the age of 20 and 24 in Chiang Mai and Chiang Rai provinces have been turned away from military service because they are infected with the AIDS virus.

But Thira said there have been "encouraging signs" that the formerly skyrocketing rate of AIDS infection was beginning to ease.

About 9,200 AIDS carriers were found last year, compared with 10,770 discovered in 1989.

"The fact that fewer people were found infected last year despite a much more extensive medical survey gives us

hopes that the situation has somewhat stabilized," Thira told THE NATION in an interview.

Fewer carriers were also found last year among drug addicts and prostitutes. That indicates wider awareness among the high-risk groups, Thira said.

"It seems our campaigns for the use of condoms and against the sharing of needles are beginning to yield fruit," he said.

One sign of greater condom awareness is an "unprecedented" decrease in the number of cases of venereal disease, the director general added.

According to official figures, seven in every 1,000 Thais suffered from venereal diseases in 1988. The ratio was reduced to 4:1,000 last year.

Thira attributed the apparent success in containing the spread of AIDS in Thailand to a concerted, large-scale campaign by the government and help from the private sector.

Thira said the government's anti-AIDS policy is focusing on education of children and teenagers, and continuous creation of awareness among high-risk people.

Now primary schoolchildren are being taught about AIDS, and many children and teenagers have been trained to become "anti-AIDS volunteers" in their communities.

Despite the optimism, Thira cautioned that the AIDS threat in Thailand is still great.

He said Thailand has about 86,000 prostitutes and more than 4,200 of them are carrying the deadly AIDS virus.

The figure, which is based on surveys by the Police Department, is widely disputed by many women's rights organizations who insist that the real number is in the 100s of 1000s.

A major "women's campaign" will soon be launched to encourage Thai men to refrain from promiscuous sex and frequenting brothels, Thira said.

The nationwide campaign will involve leading female public figures "from all walks of life" led by Thanphuying Bunruan Chunnawan, the prime minister's wife.

Thira said it would be the biggest-ever joint attempt by Thai women to "change the sexual concepts" of Thai men. It will involve exhibitions, demonstrations and personal advice, he said.

"We need to change such concepts like that requiring 'grown-up' Thai men to visit prostitutes 'without a shield' to prove their manhood," Thira said.

Surat Thani HIV Cases

91WE0186A Bangkok THE NATION in English
10 Dec 90 p A2

[Article: "500 Test Positive for AIDS in Surat Thani"]

[Excerpt] Over 500 people in Surat Thani province are among the 22,533 people in Thailand known to be infected with AIDS, a senior provincial doctor said yesterday.

Surat Thani's Muang district is the area most threatened by AIDS, according to the findings of a three-year survey. Other AIDS-threatened areas are Koh Samui, Ban Na San, and Phunphin districts.

Dr. Charoen Boonchai from Surat Thani said only Ban Ta Khun and Khiensa districts were free from AIDS, adding that most of the 508 people found carrying the HIV virus were prostitutes and drug addicts. [Passage omitted]

VIETNAM**Anti-AIDS Programme in Ho Chi Minh City**

BK2401155691 Hanoi VNA in English 1450 GMT
23 Jan 91

[Text] Hanoi VNA Jan 23—An anti-AIDS programme was initiated recently in Ho Chi Minh City.

Under the programme, a consultative centre which is ready to answer any phone call inquiring about AIDS and an AIDS department at the tropical disease centre will be set up. The propaganda about AIDS will be stepped up so as to help everybody know how to prevent the disease. Besides, mass organizations and public offices in the city will be mobilized to participate in the programme. An anti-AIDS day will be organized throughout the city.

AIDS Scare Spurs Solution to Drug Problem

BK1701041491 Hong Kong AFP in English 0337 GMT
17 Jan 91

[Article by Leo Dobbs]

[Text] Hanoi, Jan 17 (AFP)—Vietnam's first AIDS scare has put a spotlight on the mounting menace of drug addiction in a country where opium smoking is legal, so long as you grow it yourself.

Drug abuse is "the concern of everybody and, especially for our city, is the main problem which we have to solve in the future," Vuong Tuoc, director of the Hanoi human aid programmes, said in a recent interview here.

Truong Quang To, head of a Hanoi treatment centre for drug addicts, called drug abuse a "social evil" which he said authorities "have to put much attention into solving."

But Mr. Tuoc pointed out, "now we have a new task—to study whether AIDS is present in Vietnamese people."

Vietnam's first case of Acquired Immune Deficiency Syndrome (AIDS) was discovered in southern Ho Chi Minh City early last month.

A 30-year-old woman tested positive as she was preparing to emigrate to Australia. Those who have tested positive to the virus can develop full-blown AIDS, for which there is no cure.

Informed sources said she probably caught the virus from a Vietnamese exile who returned home from West Germany for a month in 1988, adding that she likely had a number of other sexual partners afterwards.

The AIDS virus, which is transmitted by contaminated blood, breaks down the body's immune system. Highest risk groups are homosexuals, prostitutes, drug addicts who inject themselves with used needles and blood transfusion patients.

Mr. To said drug abuse "creates AIDS and other diseases, including liver problems, through injections."

He said there were between 4,000 and 5,000 regular drug users in Hanoi, compared to more than 10,000 in Ho Chi Minh City, which was known as Saigon before North and South Vietnam were reunified in 1975.

This compared to about 600 here in 1954, when the north gained independence from France, and less than 100 between 1954 and 1975, Mr. To asserted.

Mr. Tuoc compared the rapid increase to reunification with the south, which had a large drug culture when U.S. armed forces were based there. The launch of Vietnam's open door policy in the late 1980s also made it easier for traffickers to import narcotics such as morphine and heroin.

Mr. To said such drugs could not be found in Vietnam and "now we are trying to find the source." Both officials said drugs came from Thailand, Laos and even China to the north. Marijuana is imported from Cambodia, they said.

"In Hanoi, opium is the most popular drug, then morphine," said Mr. To, adding that illegal opium dens were still doing business in the capital.

Home-grown opium comes from northern mountainous areas bordering China and Laos and, paradoxically, it is not a crime to smoke opium so long as you grow it yourself.

Selling it to others or inducing others to smoke opium is a crime punishable by stiff jail sentences.

Mr. Tuoc noted that punishment for trafficking was tough but "compared to the laws in Iran it is not tough, as there they kill people—here we only put them in jail for 20 years."

"We have a drug education programme even for children in schools and for workers," Mr. To said. "We are going to have a big campaign (against drug users) in 1991 ... but are waiting for the assistance of international organisations."

Meanwhile, his drug treatment centre acts as a test ground, with only 100 beds, for finding ways to treat people. Mr. Tuoc said the drug problem was generally

dealt with on a community basis as many addicts have to earn a living to support their families.

U.S.-based World Relief International recently pitched in with 15 million dollars' worth of aid for the centre but both men called on the international community for more help to battle the drug problem before it gets out of hand.

POLAND

AIDS Drug To Appear 'This Year'

*AU2301120591 Warsaw RZECZPOSPOLITA in Polish
16 Jan 91 p 2*

[K.F. report: "Soon a Polish Drug Against AIDS"]

[Text] Good news for sick people: "It is possible that this year we will receive the first few dozen grams of AZT, a Polish drug for AIDS patients," says Dr. Pawel Grieb, chairman of the Diagnostics and Therapy Development Fund. This fund, set up last April, is commencing work aimed at starting the production of this drug.

AZT will be an exact replica of the American drug of the same name. The original AZT has been officially administered to AIDS patients since last March. It has not been patented, which means Poland can produce it. World medical experts say that at present this is the only drug that slows down by a factor of several times the development of AIDS in people who are HIV positive and alleviates the symptoms. What is more, it makes it possible for an AIDS patient to live normally, just like with diabetes or multiple sclerosis. In the United States, a year's supply of AZT costs from \$8,000 to \$10,000. One gram costs from \$12 to \$15.

"The Polish AZT will be just as effective as the American variety, only much cheaper," says Dr. Grieb. "However, according to calculations made last October, about 6 billion zlotys (Z) will be required to produce 100 kg of AZT per year. Patients with the HIV virus should receive half a gram of AZT per day, hence the Z6 billion figure."

But where is the money to come from? Unfortunately, and at the same time fortunately, money is the only factor that determines when this drug will appear on our

market. The founders of the fund, who include distinguished scientists from the spheres of biochemistry, medicine, and biology, are doing their utmost to gather the necessary funds. So far they have gathered Z60 million, mainly from their own pockets. The first significant donations have come from the Polish Savings Bank and Polish Telecommunications, but other, richer firms, well known from television commercials, are silent. So is the Health Ministry. The Ministry of Industry has pledged to provide another Z300 million this quarter, which will permit the purchase of the necessary raw materials for the production of AZT.

AIDS is a danger to all Poles. Experts say that the number of cases is doubling every year. In three and one-half years' time Poland will have 10 times the number of AIDS patients it has today, and in six years time it will have 100 times that number, i.e. there will be 100,000 patients.

YUGOSLAVIA

AIDS Commission Registers 174 Cases

*AU3001225091 Belgrade BORBA in Serbo-Croatian
21 Jan 91 p 14*

[B. P. report: "Yugoslavia Has 174 AIDS Patients"]

[Excerpt] Belgrade—According to the latest figures from the Federal Commission for AIDS, there were 174 people suffering from this virus in our country at the end of last year. Most of them are in Serbia, 119 (with 14 in Vojvodina and 4 in Kosovo), while there are 26 AIDS sufferers in Croatia, 10 in Slovenia, 6 in Bosnia-Herzegovina, 2 in Macedonia, and 1 in Montenegro. Ten of the patients are foreign citizens. Forty-four sufferers died last year, of whom 22 had contracted the virus the same year, while the other 22 had contracted it in previous years. [passage omitted]

BRAZIL

Over 15,000 Infected With the AIDS Virus

*PY0802141691 Brasilia Domestic Service in Portuguese
2200 GMT 7 Feb 91*

[Text] The number of AIDS cases in Brazil is increasing because 588 new cases were detected over a period of barely two months. The total number of people infected with the AIDS virus in Brazil is 15,137.

CUBA

AIDS Hospital Opens in Guantanamo, 18 Cases Reported

*FL2901010091 Havana Radio Reloj Network
in Spanish 2042 GMT 28 Jan 91*

[Text] A new hospital for AIDS patients was opened in Guantanamo. This hospital, which treats seropositive patients, is treating 18 AIDS carriers who reside in this province.

Although some sectors of the hospital are still under construction, the AIDS patients are treated by an internal medicine specialist, a psychologist, five nurses, and one social worker.

These patients have access to play rooms, video rooms, comfortable rooms with air conditioners, television sets, and other recreational areas.

The majority of AIDS victims in Guantanamo Province are between 15 and 30 years old. Several married couples have also been affected by the disease. All of these AIDS patients are undergoing an efficient medical treatment that is paid for by the state which spends up to \$8,000 per year per person.

German Professor Contends AIDS Virus Created by Pentagon

*PA2401213091 Havana International Service
in Spanish 0000 GMT 24 Jan 91*

[Text] The AIDS virus was created in the central laboratory of the Pentagon for biological warfare, Dr. Jacobo Segal, professor emeritus of the Humboldt University of Berlin, has stated. Segal said that such a theory is supported by many scientists and has not been refuted.

According to the specialist, AIDS is a combination of the animal virus visna and the human HTLV. This combination, he said, is not produced naturally, but through gene technology, to permit the attack on human immune cells.

DOMINICA

AIDS Committee Chairperson Outlines Priorities

*FL0602155591 Bridgetown CANA in English
1311 GMT 6 Feb 91*

[Text] Roseau, Dominica, Feb 6, CANA—Newly-appointed chairperson of Dominica's National AIDS Committee, Dr. Carissa Etienne, says those who think the scare is over and that the disease is no longer a priority are fooling themselves.

"AIDS is very much with us," she told reporters. "We have had 13 cases to date, and we expect the number of cases will continue to rise because we think that transmission is continuing. And I think we are fooling ourselves if we feel that the problem is over—it's very much with us."

She has identified two major priorities in the fight against AIDS (Acquired Immune Deficiency Syndrome).

"First (is) the decentralisation of the AIDS programme," she explained. "That means getting all health workers to accept the AIDS problem as their problem, and to integrate the AIDS control into national health programmes."

Etienne, who is director of primary health care services in Dominica, says the second priority will be to broaden the base for community education.

"We aim to do that through the setting up of a national AIDS army.... where we will infiltrate every institution, every workplace, every youth group, everywhere that people gather.

"And we will enlist soldiers for AIDS. And these people will be our mouthpieces.... and they will be supported by training and dissemination of information," Etienne added.

Etienne has advised that with the carnival season in swing Dominicans guard against the kind of behaviour which can lead to contraction of AIDS.

HONDURAS

Sharp Increase in AIDS Predicted

*91WE0148A San Pedro Sula TIEMPO in Spanish
30 Nov 90 p 19*

[Excerpt] Tegucigalpa—Honduras, a country with the greatest incidence of AIDS in Central America, will record at least 35,000 confirmed cases of the deadly disease, including 1,000 children under a year old, by 1995.

The horrifying figures were provided by the country's top-ranking health authorities on the occasion of the First National Congress on AIDS, which has been under way in this capital since last Thursday.

Participating in the event are national and foreign reporters who have spent most of their time during the past decade dealing with the problems of patients with AIDS.

Jose Enrique Zelaya, chairman of the National Commission on AIDS, claimed that, by 1995, it is expected to confirm between 35,000 and 40,000 AIDS cases in the country. They include 1,000 young children, who will probably die unless pregnancies are curbed.

Honduras is the country with the most cases in Central America, with 52 percent of the total cases in the region reported here. It is followed by El Salvador and Panama, with 14 percent each; Costa Rica, with 12; Guatemala, with 6; and Nicaragua and Belize, with 1 percent each.

Cesar Castellanos Madrid, minister of public health, expressed his concern over the projections for the disease in the country, which indicate that the number of cases will more than double during the next few years.

As of October 1990, 966 cases had been detected in Honduras, with 347 among females, 32 among children under age ten, and the rest among males, the majority of whom are heterosexuals.

Of the total confirmed cases, 347 are among females. Of these women 294 contracted the disease from sexual relations, and 219 [sic] were infected by their husbands or usual partners, who are the ones that have evinced the risky conduct.

The first AIDS case in the country was reported in 1985, although it is estimated that, as early as 1984, two persons were suffering from this disease: a woman, the wife of a sailor who supposedly infected her; and the second case, a university professional who traveled constantly to San Francisco, California, visiting a gay bar in the city where he resided.

At present, 1,404 cases have been studied, 966 of which have proven positive. There are 54 more cases under study, with a 100 percent chance of proving positive.

Of the 966 confirmed cases, 304 are living, 308 are dead, and the whereabouts of 354 is unknown. It is estimated that 50,000 persons in Honduras are infected with the fatal disease.

San Pedro Sula is the city having 41 percent of the total cases; followed by Tegucigalpa, with 12. The northwestern strip of the country is considered the area most affected in Honduras, with 74 percent.

Zelaya claimed that AIDS has been spreading throughout the entire country in towns with over 5,000 inhabitants.

According to the projections, there are in the country about 1,042 persons infected for every 100,000 inhabitants; this being considered one of the highest rates in Latin America.

Zelaya and Castellanos Madrid voiced their concern over the high rates of this disease among females.

The trend is rising among women, according to Zelaya, who explained that from 1984 to 1986 25 percent of the cases reported were among women, and that by 1990 this proportion had risen to 38 percent.

Another group with high rates is that of children. To date, out of the 966 cases, 32 involve children under age ten; and 23 of these were infected by their mothers.

Zelaya claimed that the increase in cases among children is alarming, because they tripled in comparison with the number reported at the end of 1989.

Lair Guerra de Macedo, a Brazilian physician specializing in the treatment of AIDS patients, explained the relationship existing between persons suffering from the "20th century disease" and the economic crises besetting their nations.

This disease holds serious implications for Third World nations, if one considers the fact that those infected are young, the majority being under age 30, and representing the work force of a nation.

Furthermore, this represents major economic implications, because the treatment for this disease is extremely expensive.

It is estimated that the treatment of an AIDS patient fluctuates annually between \$60,000 to \$147,000. Such treatment does not ensure that the patient will be cured of the disease, but only that his life expectancy will be extended.

He said that there is an urgent need to take action to cope with this disease, noting that AIDS is a social, political, and economic problem. [passage omitted]

PERU

Health Ministry Reveals Deaths From AIDS Last Year

PY3001132291 Lima RTP Television Network in Spanish 1800 GMT 28 Jan 91

[Text] Health Minister Carlos Vidal Layseca reported today that 145 people died from AIDS last year out of 345 confirmed cases. He said that his ministry will install health centers across the country to fight AIDS.

INDIA

More on Developments in Fight Against AIDS

Spread Into Gujarat

91WD0330 Bombay THE TIMES OF INDIA
in English 3 Dec 90 p 11

[Article by Gautam Mehta: "Gujarat Faces AIDS Scare"]

[Text] Ahmedabad, December 2—The dreaded AIDS is no more a distant danger. Incrementally but menacingly it is inching its way towards Gujarat.

The number of people carrying the AIDS virus in the state has increased from only 26 last year to 510 today as per the data from the serosurveillance for human immuno-deficiency virus (HIV) infection being conducted by the Indian Council of Medical Research (ICMR) at the B.J. medical college here.

This makes Gujarat fourth in the country—after Maharashtra, Delhi and Tamil Nadu—in terms of increase in the number of AIDS-carriers.

All over the country till October 30 as many as 4,70,118 [as printed] people have been screened for HIV antibodies (AIDS infection). Of these, 2,600 have been confirmed to be seropositive by the National Institute of Virology (NIV), Pune.

The ICMR officials fear that the figure of 510 AIDS-carriers may be just the tip of the iceberg, and the number of people carrying the AIDS virus will be much more if the surveillance is intensified throughout the state.

The ICMR officials have also indicated that more than 50 percent of the HIV infections detected in the state will turn out by 1995 to be fully-developed cases of actual AIDS patients.

A study of the reports of all the 510 HIV-infected people in the state by the senior doctors of the surveillance centre has revealed that it is the professional blood donors and heterosexually promiscuous persons who are the most serious source for the spread of the AIDS virus.

Out of 510, as many as 430 HIV-infected people are from Surat alone and all of them are professional blood donors. It has also been revealed that most of these donors constitute a floating population and have come in contact with prostitutes in Bombay, Surat and Baroda.

Similarly, 11 non-resident Indians, living in the state (two from Raikot and Nadiad each and one from Jamnagar, Baroda, Bulsar and Godhra each) have been found to have HIV infections. Two females and a male from Bulsar town, who received blood transfusions from professional blood donors from Baroda, whose samples were sent to NIV, Pune, have been confirmed as seropositive cases.

Five professional blood donors from Mehsana, Anand, Rakjot, Jamnagar, and Bhavnagar each are reported to have contracted the HIV infection after having sexual relations with prostitutes.

It is noteworthy that two girls and a boy have been confirmed as seropositive HIV-infected cases. These three include a five-year-old child who was suffering from thalassemia (requiring repeated blood transfusion) who had to receive 36 bottles of blood from professional blood donors in the private laboratories and four in the Indian Red Cross society laboratory.

Similarly a seven-year-old girl had received 50 bottles of blood from the professional blood donors. By the time their parents took her to the Indian Red Cross society, it was too late. A senior doctor of the Indian Red Cross society said that the girl who was confirmed to be HIV-infected, was now in the process of becoming an AIDS patient. She has been given 22 bottles of blood from the voluntary donors in the society's laboratory. This girl was also a thalassemic case.

The third case is of a six-year-old girl, who had received 80 bottles from professional donors in the city as she was also a thalassemia patient. The problem, some doctors feel, will only aggravate as private laboratories remain indifferent to medical ethics as well as to the government's directive to test all blood samples. Exceptions are only a handful.

In a private laboratory in the Lal Darwaja area, when it took its job seriously, it suspected six voluntary blood donors of HIV infection. The owner of the laboratory said that he had tested the blood samples of these six donors and sent them to the NIV, Pune, which later confirmed the cases as seropositive HIV-infection.

However, the owner of the laboratory does not want his establishment to be identified in this paper as he is only one among all the private laboratories in the city to be following the government's directive to test each and every blood sample. The owner has already received a threat of dire consequences from the medical fraternity that he must stop testing the blood samples as nobody was following the government directive.

This alliance of convenience between professional donors and private laboratories is threatening to cast its malignant shadow over Gujarat.

What some observers believe to be a very pernicious development is the involvement of professional touts in this business. An investigation into the reckless business of a startling fact is that private pathologists excuse beggars, drug addicts, drunkards, heterosexuals, promiscuous persons and hotel boys to donate blood.

A senior official of the surveillance centre says that the beggars sitting in front of a restaurant near Patwa Sheri in the Karanj area are regularly summoned for donating blood.

Dr. K.K. Shah, the past president of the Indian Medical Association and the president of the South Medical Association, who was the pioneer in launching a movement for the voluntary blood donation way back in 1949, regrets the unhealthy commercialisation of blood collection. Private pathologists pay only Rs 50 per bottle but sell at the rate of Rs 300 per bottle, Dr. Shah adds. He demanded that government must ban professional blood donation.

Another serious related development is the increasing incidents of homosexuality among the youths in the city. According to Dr. Anugrah A. Parikh, a skin specialist, L.G. Hospital and assistant professor, N.H.I., municipal medical college, on an average every month at least 70 cases of venereal disease were reported and most of them are the victims of homosexuality. These youths are either hotel boys, beggars and youths living in hostels. Such patients play a major role in spreading the HIV infection.

The ICMR has directed the surveillance in the state to ensure that HIV infected persons are correctly and properly cared for, thereby watching against accidental infection. Twenty major recommendations have been framed.

The ICMR authorities have also supplied new kits for testing the samples to the newly set-up laboratories in Baroda and Surat.

Plea From West Bengal

91WD0330 Calcutta THE SUNDAY STATESMAN
in English 2 Dec 90 p 9

[Text] The West Bengal Health Minister, Mr. Prasanta Sur, called upon voluntary organizations on Saturday to help detect AIDS infected persons among high-risk groups. Although prostitutes are the most vulnerable to this dreaded syndrome, the Government's own machinery has not been able to screen them adequately, he said while inaugurating a function organized at Great Eastern Hotel, Calcutta, by the State Department of Health and Family Welfare to mark World AIDS Day.

Mr. Sur said that more than 25,000 blood samples had been screened in West Bengal and only 11 of these were found to be HIV-positive. Of these, only three were full-blown cases. This was a very small figure, but complacency on that count may be misplaced, the Minister said, since large sections of the most vulnerable group have not been screened to show the real magnitude of the problem. Also, Calcutta is a high-risk city, since it has international air and seaports, and is frequented by foreign sailors, tourists and students.

The Minister also referred to a large number of AIDS cases that have been sent to West Bengal from Manipur. These are mostly users of intravenous drugs, who have caught the infection from hypodermic needles. Mr. Sur said the syndrome had spread across 182 countries. India had felt safe because of the orthodox life-style of its

people and their strong family ties, but this sense of security had been proved wrong.

Dr. M.S. Chakraborty, head of virology at Calcutta University's School of Tropical Medicine, said "Women and AIDS" had been chosen as the topic of the discussion session, since more than four million of the 15 million HIV-positive people in the world were women. They contract the disease from men who carry the virus and pass it on to their progeny. That is why it is imperative for them to take all possible precautions to avoid sexual contact with AIDS carriers. The other common routes of contracting AIDS are: contaminated blood transfusion, contaminated needles and contaminated blood products. Dr. Chakraborty and 580,824 blood samples had been screened in India till November 29 this year. Of these, 4,882 had been found HIV-positive by the ELISA test. The Western Blot method had confirmed the finding for 4,082 samples. Till August 31, there were 57 full-blown cases in the country, Dr. Chakraborty said. Dr. Sukumar Mukherjee, head of the medicine department at Calcutta Medical College and chief of the State's AIDS cell, said there are likely to be at least 100 infected persons for each full-blown case detected. More than 1,000 persons had been tested HIV-positive in Manipur, he said. He explained the need for special precautions for women with the help of slides. Among others who spoke were Mr Biswanath Choudhuri, State Minister for Jails and Social Welfare, Dr. A.K. Chandra, Director of Medical Education, and Dr. S.B. Dutta, director, Central Blood Bank.

The Chief Secretary, Mr. T.C. Dutt, presided over the function. Mrs. Lina Chakraborty, Secretary, Health and Family Welfare, welcomed the participants. World AIDS Day was also observed by Motivation, a constituent of the Drug and Alcohol Workers Forum, in collaboration with the British Council. Two discussions were organized, one on "AIDS/HIV: Current perspectives" and another on "AIDS/HIV: Information and infrastructure."

AIDS Control Plan, Statistics Told

91WD0379 Madras THE HINDU in English
26 Dec 90 p 10

[Text] New Delhi, 25 Dec—The Directorate General of Health Services (DGHS) has prepared a medium-term plan for prevention and control of AIDS (Acquired Immuno Deficiency Syndrome) in the country in consultation with the WHO (World Health Organisation). Involving an outlay of Rs 33 crores, the Government has decided to implement the control activities in the four metropolitan cities and the North Eastern States of Manipur, Nagaland and Mizoram, which have reported a rapid increase in HIV infection.

Efforts are being made to secure assistance from bilateral donors by providing funds through the WHO so that extra budgetary resources are available for implementing the plan, according to sources.

Recent epidemiological information compiled by the Indian Council of Medical Research from 48 surveillance centres including four referral centres indicates that the predominant mode of transmission of HIV infection in the country is heterosexual. Of the 5.80 lakh blood specimens screened till 31 October this year, from persons practising high risk behaviours, 4082 were found to be sero-positive for HIV infection, giving out a sero-positivity rate of 7.0 per 1,000 persons among the potentially viable groups.

Intra-venous Drug Users

The three north-eastern states are mainly concentrated with intra-venous drug users. Till the end of October, 2,324 intra-venous drug users were screened in Manipur and 1016 were found to have the infection. Thus Manipur accounts for almost 25 percent of the total number of HIV infected persons.

According to another assessment, the severe spread of HIV infection is now occurring in Bombay, mostly through heterosexual route. About 20 percent of the estimated number of one lakh prostitutes in Bombay are infected. A similar spread, although of a lower intensity, is occurring in Madras while the epidemic is less severe in Delhi and Calcutta.

While the Government is giving priority to intensive health education campaigns promoting safer sexual practices for preventing the transmission of the infection, the second area of priority is to ensure the availability of safer blood and blood products. Since the probability of infection spreading through blood and blood products has been estimated at 90 percent, the DGHS has issued specific instructions to manufacturers of blood products to take suitable precautions.

Testing of Donors

According to the guidelines, each unit of the donor has to be tested for HIV antibody, testing of pooled blood plasma and testing of each of the batches of finished product. All blood products should carry a certificate from the manufacturer clearing it from HIV infection. Testing of all donors by establishing zonal blood testing centres linked to blood banks has already started in the four metropolitan cities and 27 other major cities. Gradually it is proposed to expand blood testing facilities to all cities having a population of over five lakhs and to link blood banks to the zonal testing centres.

Under the blood donor screening programme, 6.67 lakh units of blood have been screened till last month, of which 4,468 units were found to be reactive on the basis of the preliminary ELISA test. The infected blood has been destroyed with the view to ensuring the safety of transfusion system.

As part of more stringent measures, the DGHS has also issued guidelines to all medical colleges on hospital infection control and disposal or embalming of HIV infected persons. Besides, the facilities for diagnosis and

treatment counselling facilities in AIDS units of 13 identified hospitals will also be improved. The other programmes for action under the medium-term plan include circulation of health education material to professional and potentially viable or high risk groups besides using the communication medium more effectively for disseminating information on AIDS prevention.

ISRAEL

Spread of AIDS in 1990 Examined

*91WE0157A Tel Aviv 'AL HAMISHMAR in Hebrew
4 Dec 90 p 9*

[Article by Ronit Morgenstern]

[Text] "Until 2000, we will have some kind of AIDS vaccine cocktail that can be tried on human beings. However, it will be about 30 years before this vaccine's effectiveness can be verified." This is how Professor Ze'ev Handzel, the chairman of the AIDS Prevention and Research Association in Israel and the director of the Clinical Immunology Unit and the Pediatric Research Institute at Kaplan Hospital in Rehovot, defines the complex, problematic nature of discovering an effective vaccine against the fatal AIDS virus, or Acquired Immune Deficiency Syndrome, which has been confounding the world of science and medicine for ten years. At the same time, the life expectancy and quality of life of AIDS patients has improved significantly in recent years, thanks to drugs and treatments that have been developed. If, until 1986, an AIDS patient lived for two years after first being diagnosed, patients now live four or more years, Prof. Handzel states. The currently accepted drug for treating AIDS patients is AZT. AZT is effective but has side effects, namely the suppression of bone marrow and the destruction of erythrocytes and leukocytes. Two new medicines, DDI and DDC, which are analogous and similar to AZT, are in an advanced experimental stage. Their advantage is that their side effects are much less powerful than those of AZT. The trend in medicine is to use these three medicines cyclically in small doses, like antibiotics: One drug is administered every three months to prevent the development of resistant strains of the virus.

AZT is currently given as preventative treatment to AIDS carriers in whom a decline in immune cells has been detected. In controlled groups that receive this preventative treatment, a minimum, one-year deferment of the disease's appearance has been obtained. At present, the disease appears within five to ten years of when a person becomes infected with the virus. Early detection is especially important, maintains Prof. Handzel, because, as stated, preventive treatment to defer the disease is now possible, as is direct treatment of the disease and its irregular infections. These treatments qualitatively improve and prolong the patient's life.

Drug-Resistant Strains

As stated, one solution to the AIDS disease being pursued by science is the discovery of a vaccine against the disease. To date, two strains of the virus have been distinguished clearly, HIV 1 and HIV 2. Last year, Prof. Handzel states, a new strain was isolated in a small number of patients: "This is a family of virus strains created by mutation; all of them have a similar operating mechanism. As we advance in researching the disease, we are discovering more strains and forms of it. The virus envelope changes constantly, which makes it difficult to find an effective vaccine. There are now strains that are resistant to drugs that have already been developed." Nevertheless, because all of these strains have a similar operating mechanism, there is room for discovering a vaccine. There is indeed progress in this direction, but first the difficulties: "Finding a vaccine has encountered several, difficult obstacles, including: the constant changing of the virus envelope; the very long incubation period of the virus before the disease breaks out, which results in many unknowing carriers, which in turn makes it difficult to develop a vaccination policy; and the fact that 30 years must elapse before a vaccine's effectiveness can be determined, because of the quiet spread of the virus. Another major difficulty is the need to discover a vaccine that will protect immune cells attacked by the AIDS virus. In other words, it is not only necessary to create antibodies against the virus. The immune cells themselves must also be immunized. In other words, this would be a most complex vaccine preparation."

In any case, immunization experiments have been performed, and researchers have shown that monkeys can be protected from the analogue of the human AIDS disease by means of repeated injections of vaccine. These and other experimental successes, despite differences of opinion regarding the vaccine's composition, strengthen Prof. Handzel's opinion that science will put together an AIDS vaccine that can be tried on human beings within a decade.

Forbidden Relations

Last year, there was an increase in the number of female AIDS patients who are not in the risk group comprising drug addicts and blood transfusion recipients. The frightening conclusion of the recent year in AIDS research is that the primary AIDS transmission method is now heterosexual sexual relations. In other words, if it was once thought that anal sexual relations between homosexuals constituted the main sexual form of AIDS transmission, this is no longer the case. Infection through heterosexual relations is caused by contact between sperm and the mucous membranes of the female member of a couple. According to Prof. Handzel, oral sexual relations (contact between a sexual organ and the mouth) are also now in question, as there have been cases of transmission due to contact between saliva and sperm during oral sexual relations, especially in the presence of ulcers in the mouth cavity. The probability

of transmission in this way is low, but it exists. Last year, the number of homosexual AIDS patients and carriers declined considerably in Israel, while the number of heterosexual AIDS patients and carriers, including many women, increased.

What about Israel? To date, about 140 persons have become sick with AIDS in Israel, of whom 80 have died. Fortunately, Israel is still very far from the West's AIDS morbidity statistics. The percentage of virus carriers in the population is around 0.01 percent, one of the lowest rates in the world. Even the frightening forecast of 4,000 carriers and about 100 patients per year in 1991 has not materialized. However, Prof. Handzel does not believe that there is any room for indifference, because today's patients were the carriers of five to ten years ago, when the disease was in its initial stages. Currently, there are 540 diagnosed carriers in Israel and at least thousands of undiagnosed carriers. Within five to ten years there will be hundreds, even thousands, of patients in Israel who will flood the hospitals, and Handzel warns that preparations must be made for such an eventuality.

Early Prevention and Detection

At a Health Ministry news conference, on the occasion of International AIDS Day, Health Ministry Director-General Dr. Moshe Mashiah stated calmly that the growth rate of the number of AIDS patients in Israel is especially moderate (true to date). However, Handzel believes that Mashiah errs in thinking that the fact that 50 percent of AIDS patients were diagnosed previously as carriers while 50 percent were not identified as carriers indicates that the true number of carriers is two to three times higher. Prof. Handzel believes that the true numbers are much higher (ten times higher according to world statistics). It is thus important to have an information policy that serves to educate people about AIDS, prevent it, and achieve early detection. This matter is a cause for concern, especially given the Health Ministry's declaration that its budget can contend with 20 to 30 new patients per year (it costs \$20,000 per year to treat a single patient), but beyond that, the health system would find it difficult to cope. As stated, Prof. Handzel expects hundreds and thousands of cases within five to ten years.

AIDS experts in Israel, including Prof. Handzel, are critical of the Health Ministry's information policy and the Israeli Government's AIDS prevention efforts. "In the West, 40 percent of the AIDS budget is allocated for information and education. In Israel, 16 percent was allocated only this year according to Prof. Handzel. Of the total budget for information and the diagnosis and combing of blood doses, which is 2.5 million shekels, 350,000 shekels were allocated for information. The Education Ministry has put together an information program which is optional. According to Handzel, very few schools are applying the program. At yesterday's meeting of the Knesset labor and welfare committee, Handzel demanded that health insurance schemes become involved in financing the AIDS budget: "I do

not understand why tests must be at the expense of the Health Ministry's meager budget. Why doesn't each insured person's health insurance program [assume the cost], as is the case with any other blood test, inasmuch

as the health insurance programs have an interest in knowing if an insured person is a virus carrier, because early detection clearly prevents expensive hospitalization and treatment?"

Radio Reports Current Soviet AIDS Statistics

*LD2401190391 Moscow Domestic Service in Russian
1520 GMT 24 Jan 91*

[Summary] Correspondent (Tatyana Makulovskaya) says that 585 Soviet citizens and 579 foreigners have now been identified as AIDS virus carriers in the USSR.

An average of 10 virus carriers are being diagnosed every month. Although no case of infection inside hospitals has come to light in the past year, 258 children were infected in this way, of whom 15 have now died. A total of 24 people have died of AIDS in the country as a whole.

CANADA

AIDS Cases in Quebec, HIV Compensation Plan, Needle Exchange

Cases in Quebec, Nation

91WE0163 Windsor *THE WINDSOR STAR* in English
29 Nov 90 p C4

[Text] Montreal (CP—More women in Quebec are infected with the AIDS virus than in other provinces, says a Montreal researcher.

The blame rests with a large number of immigrants from countries where the disease is widespread and the rampant use of injection drugs, Dr. Catherine Hankins, head of the AIDS Study Center at the Montreal General Hospital, said Wednesday.

The research is even more startling because the incidence of AIDS among homosexual and bisexual males in Toronto and Vancouver is much higher than in Montreal, she said.

"I would say the prime reasons for the high rate of women who are HIV-positive (who have the virus linked to AIDS) in Montreal are two-fold," said Hankins.

"First of all, we have a larger number of immigrants here from Haiti and Africa than other Canadian cities. Secondly, there is a huge problem of injection drug use in Montreal which is causing large numbers of both men and women to become infected with HIV."

Speaking to a group of about 200 medical researchers and social workers at a conference on Women and AIDS in Quebec, Hankins pointed out there are only 150 reported cases of women with AIDS in Quebec.

But Hankins said her research, based on testing babies at birth, indicates there could be as many as 1,000 women in the province who are infected with HIV.

There are 1,382 total reported cases of AIDS in Quebec. Across the country, there have been 231 reported cases in women of a total of 4,455, according to the Federal AIDS Center.

Every baby born in Quebec is tested for the AIDS virus. Hankins takes the number of HIV-positive babies and estimates the number of women affected province-wide.

The reason the reported cases are so low, she said, is that there is a great stigma attached to women either being HIV-tested or being registered as having AIDS.

Even though the virus is showing up mainly in specific groups of women, Hankins said more and more women are in danger of contracting the AIDS virus.

"All this information means there is a great need to warn women about AIDS," said Hankins. "They must be aware they are risking their own lives through unsafe sex as well as the lives of their unborn children."

Another speaker at the forum said the main way women can protect themselves against the AIDS virus is to insist on safe sex from their partners.

"Women must demand that their sexual rights be respected," Maria de Koninck, head of women's studies at Laval University in Quebec City, said. "That means they must be equal in relationships and they must have the power to say 'No' to unprotected sex."

HIV Compensation Program

91WE0161 Toronto *THE GLOBE AND MAIL*
in English 14 Dec 90 p A7

[Article by Beverly Smith]

[Text] Hundreds of Canadians infected with the AIDS virus through blood transfusions are unaware of a federal assistance program that ends this year, the Canadian Hemophilia Society says. The deadline to apply for assistance is December 31.

Health and Welfare Canada started the program a year ago to provide compensation for people infected with the human immunodeficiency virus through blood transfusions. Before 1985, blood donors were not tested for HIV.

So far, about 1,250 Canadians (950 hemophiliacs and 300 others) have been compensated under the plan, under which applicants must prove that:

- They received blood or blood products in Canada between 1978 and 1989;
- They became infected with HIV as a result of the transfusions in Canada;
- They were Canadian citizens or landed immigrants when they became infected.

They must also currently live in Canada.

The plan provides \$120,000 in tax-free compensation over four years not only to those with full-fledged cases of AIDS but also to those who have tested positive for the virus. The money goes to the estates of those who have already died.

In the early 1980s, blood donors were not routinely tested for HIV because tests were not available and because researchers did not fully realize the risks associated with the virus. The Canadian Red Cross Society now ensures that blood contaminated with the AIDS virus is not used.

The federal government has said that no one was at fault for earlier infection.

It has been estimated that more than 50 percent of hemophiliacs in Canada have been infected with HIV.

Hemophilia is a genetic bleeding disorder that affects one in every 5,000 Canadian males. Although women

may pass along the defective gene to their children, they do not show symptoms of the disease.

Vancouver Needle Exchange

91WE0161 Ottawa THE OTTAWA CITIZEN
in English 14 Dec 90 p A13

[Text] Vancouver—The downtown east-side needle exchange now is the largest service of its kind in the world and one of the cheapest and most successful in fighting AIDS among intravenous drug users, says the exchange's director.

Drug users who swap their dirty needles for clean ones at the exchange are four times less likely to test positive for the HIV virus that causes AIDS than are clients of similar services in Montreal and Toronto, said John Turvey.

The needle exchange, which started two years ago, gave out 37,000 needles last month to about 1,000 users of cocaine and other illegal drugs. It got about 90 percent of them back after they were used.

ITALY

Recent AIDS Study Discussed

91WE0170B Milan PANORAMA in Italian 16 Dec 90
p 157

[Article by Gianna Milano: "Keep an Eye on the Bisexuals"—first paragraph is PANORAMA introduction]

[Text] A survey of the gay population reveals the role played by casual and bisexual partners in the spread of this infectious disease.

To what extent, and in what way, has the spread of AIDS changed the behavior of Italian gays? "The homosexuals were the first to be hit by the disease and then were the first to mobilize to contain it," declares Hartmut Sasse, of the AIDS operational center of the ISS [Higher Institute of Health], who in conjunction with the ARCI Gay of Bologna has just completed the first Italian survey of a sample of 1,340 homosexuals (average age 28) contacted in the discotheques, bars, saunas, and other gathering places in 12 Italian cities. "Their sexual habits quickly changed," Sasse says. "Today, we estimate that in 1989 more than 70 percent of gays with casual partners have used condoms."

In order to be able to evaluate behavior as it relates to infection with the HIV—the AIDS virus—the researchers distributed 3,000 questionnaires, 1,444 of which were filled out and returned anonymously. The survey used only 1,340 of them, however (the rest were discarded because they did not give the information requested). Of the 1,340, 710 were from the north, 291 from central Italy, and 339 from the south. "In 50 percent of the cases the changes in sexual habits took place the same year in which the gays heard about the

HIV infection for the first time, or no later than the following year," says the sociologist and sexologist Alberto Bigagli, who developed the study in association with Sasse.

The most important change related in fact to the use of the condom: In the case of a couple in a stable relationship the percentage was 48 percent, compared to 72 percent if the sexual encounters were promiscuous. These percentages are high if you consider that among drug addicts only seven percent use condoms in every sexual encounter and 34 percent use them occasionally, according to data from the Higher Institute of Health. "Only 14 percent of the Italian population as a whole," Bigagli says, "use condoms."

According to the report presented to the National AIDS Commission, a reduction in the number of partners occurred less frequently: Seventy-five percent of those interviewed had casual as well as stable partners. "Approximately two-thirds of the gays reported that they had changed their personal sexual habits, but a detailed analysis revealed the persistence of high-risk behavior in approximately half of the samples," Sasse says.

Of 7,576 confirmed cases of AIDS in Italy, homosexuals account for 839 and bisexuals 310. One-third of those interviewed in the survey reported that they had sexual intercourse both with men and with women. "This is a window for the heterosexual transmission of the virus that has consistently been undervalued by the public health authorities," alleges Franco Grillini of the ARCI Gay of Bologna, who collaborated in the survey. "In the places where gays gather," he says, "you will consistently find that about 30 percent of those present are bisexuals."

According to the most recent data from the Centers for Disease Control (CDC) in Atlanta, three percent of the AIDS cases among women must be attributed to sexual intercourse with bisexual men. According to James Curran, who heads the AIDS program at the CDC in Atlanta, cases of AIDS among women have increased by 29 percent compared to 18 percent for men. "Intercourse with drug addicts does account for 20 percent of all cases," Curran says, "but there are now quite a few men in circulation who purport to be heterosexuals but who in reality are able to transmit the virus."

Moreover, 50 percent of the homosexuals interviewed for the survey conducted by the AIDS Operational Center and the ARCI Gay, have undergone at least one test for the antibodies of the AIDS virus. "But after supplying the result, in half of the cases no information is provided concerning the disease or the risks it entails for the partner as well," says Grillini, who is now campaigning to open a consulting room in each of 10 Italian cities where anyone having problems can go for help. "There are no high-risk categories, only high-risk behavior," Grillini continues, "and to date little has been done in the area of prevention: In 1988 Minister of Health Carlo Donat Cattin gave us 250 million lire for

1,000 hospices and 50,000 brochures for distribution to the gays. This year a three-minute television spot was supposed to be produced, but nothing has been done."

The epidemiologists estimate that for every person ill with AIDS in Italy today there are 25 who are seropositive. "If that is the case," Grillini says, "it means that there could be

almost 30,000 seropositive individuals among the sexually active homosexuals (who number approximately 1 million), and little or nothing is being done in the area of information and prevention. Information and prevention are feasible only if the real problems and real needs of the homosexuals can be successfully presented to the National AIDS Commission."