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# *JPRS Report*

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# Epidemiology

**AIDS**

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# Epidemiology

## AIDS

JPRS-TEP-91-010

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10 May 1991

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## REGIONAL AFFAIRS

### Abidjan Conference Views Spread of AIDS

*AB2803184591 Paris AFP in English 1726 GMT  
28 Mar 91*

[Text] Abidjan, March 28 (AFP)—Africa's major problems dealing with widespread AIDS are due not only to a lack of equipment and qualified staff but also to politics and social barriers, specialists have concluded at a meeting here.

Early this year, the U.N. World Health Organization (WHO) reported some 81,650 AIDS cases in Africa, with a further 100,000 Africans carrying the HIV virus that causes the deadly disease. But medical experts from 12 countries gathered in Ivory Coast this week agreed that the real number of cases must be considerably higher. Nigeria has notified just 48 cases of AIDS—Acquired Immune Deficiency Syndrome—in a population estimated at more than 110 million.

Several specialists pointed out that political leaders tend to argue that malaria and diarrhoea-causing diseases that debilitate people and are well-known enemies of development still kill more people than does AIDS. A relative lack of interest helps to explain the scarcity of laboratory equipment needed to diagnose AIDS in the continent. Most countries also lack specialized care centres for people with AIDS, who are generally taken into general hospitals in the large urban areas, which are a little better equipped than the rare rural clinics.

On WHO figures, Uganda has 17,422 AIDS cases, heading the list before Zaire with 11,537 and Ivory Coast with 3,647.

Africa's many civil wars are an important factor in spreading the disease, the conference heard. It was impossible to estimate the impact on neighboring Ivory Coast, Guinea and Sierra Leone, for instance, of some 500,000 refugees from Liberia, which has been seriously affected by AIDS. Tens of thousands of African city-dwellers have been displaced by conflict.

Almost every government has now set up a special anti-AIDS team whose main task is to inform people of the disease and the ways in which it is transmitted—via sexual intercourse, infected blood or dirty needles—but these workers face problems of language barriers and illiteracy.

Abdurahman Mohamed of Djibouti told the conference that the mass media were in his view not a good way of reaching African people and suggested instead the creation of anti-AIDS sub-committees at village level. A Rwandan doctor said doctors found it difficult to help HIV-positive people understand that they were not yet ill but nevertheless could represent a serious danger to their partners.

The fight against AIDS is also a struggle against religious authorities, a number of experts said. In Rwanda, which

is 80 percent Roman Catholic, church leaders have protested that the use of condoms as an incitement to "debauchery." Similar attitudes have been expressed by Moslem leaders elsewhere.

Specialists said they wanted more support from local authorities, but mainly traditional chiefs who are more "credible" than Europeanized officials. African healers, too, are listened to more than doctors, and there are many more of them, they said.

The meeting here gathered experts from Burkina Faso, Burundi, the Central African Republic, Congo, Djibouti, Ivory Coast, Mali, Niger, Rwanda, Senegal and Zaire for a training course on treating AIDS patients.

## ANGOLA

### Health Sources Report 211 AIDS Cases up to Dec 1990

*MB1604212791 Luanda ANGOP in Portuguese  
1927 GMT 16 Apr 91*

[Text] Luanda, 16 Apr (ANGOP)—ANGOP learned in Luanda today that a total of 211 AIDS cases had been reported in Angola up to December 1990.

Elsa Montez, director of the national anti-AIDS program, says that that figure might not be accurate. She said that many sufferers of that disease do not go to hospitals.

Luanda is the province with the most AIDS cases. Zaire and Cabinda Provinces show the next highest AIDS levels because they border the Congo and Zaire, two countries with high AIDS figures.

## BOTSWANA

### Health Spokesman Comments on AIDS, Infant Mortality Rate

*MB1904210191 Gaborone Domestic Service in English  
1910 GMT 19 Apr 91*

[Text] The acting permanent secretary in the Ministry of Health, Dr. John Mulwa, says the total number of people having the AIDS virus in Botswana is 2,065 including those who have died.

He said the government has had some success and failures in implementing programs aimed at prevention and control of the disease AIDS. Dr. Mulwa said this today when opening a one-day meeting of the resources mobilization for the 1992-93 medium-term plan for the prevention and control of AIDS in Botswana held at the (Bipisa) Hall in Gaborone.

He said, to date, the Ministry of Health has established counselling services for HIV-positive and AIDS patients in most districts and hospitals. Dr. Mulwa appealed to the World Health Organization and other donor agencies

to help in the implementation of the 1992-93 AIDS control program. Dr. Mulwa said the gloomy part of the health story in Botswana is that a lot of people still see AIDS as a distant or foreign problem mainly because a few people have personally known any case of AIDS physically.

On other health issues Dr. Mulwa said Botswana has achieved one of the lowest infant-mortality rates in Africa, now estimated at 37 per 1,000. He said this has come about as a result of a combination of efforts by various donors who have become Botswana's partners in health matters which has resulted in improved access to health facilities.

## BURUNDI

### Over 3,500 AIDS Patients Recorded, 812 Deaths

*AB0104091291 Paris AFP in French 1721 GMT  
27 Mar 91*

[Excerpt] Bujumbura, 27 Mar (AFP)—Over 3,500 AIDS patients have been recorded in Burundi between 1984 and 1990, with 812 of them reported dead, according to a medical source here today. The source says the number of new AIDS patients has been decreasing significantly due to an information campaign initiated by the epidemiological unit of the National Program on AIDS and Sexually Transmissible Diseases.

According to the same source, the downward trend is expected to continue rapidly in the next few years and stabilize in 1993-94. The number of dead among AIDS patients, however, is not expected to decline during that period. [passage omitted]

## CAMEROON

### WHO Reports 243 AIDS Cases; True Figure Deemed Higher

*91WE0269A Yaounde CAMEROON TRIBUNE  
in French 23 Jan 91 p 7*

[Excerpts from an article by Waffo Mongo: "To Inform Without Shocking"; first paragraph is CAMEROON TRIBUNE introduction]

[Excerpts]—To urgently train people to be able to take care of patients and their families in health and social-service facilities—What advice to give to HIV-positive individuals, AIDS patients, and their families without causing psychological shock.

Should every HIV-positive individual be systematically informed that he is carrying the terrible virus? If so, how can this be done tactfully to blunt the psychological shock? How should the subject be brought up with a couple of which one member is a healthy carrier? Can an HIV-positive woman be made to accept the fact that she must no longer become pregnant? How? Should families

necessarily be informed when it is determined that one of their members has been in contact with the virus and may develop it?

All these questions and many others are the focus of a very special seminar on AIDS that has been in progress since last Monday at the Red Cross building in Yaounde. Organized by the anti-AIDS division, the seminar has, in fact, two objectives. First, to respond to an urgent need, given the disease's capacity to mushroom: that of training people able to take care of patients and to counsel their families in Yaounde's various health and social-service facilities. Second, the seminar, which is the first of its kind, is a preliminary test for a national meeting on the same topic.

That is why the seminar's participants are men and women whose professions bring them into regular contact with the population: nurses, teachers, social workers, Red Cross emergency workers, and even men of the cloth. [passages omitted]

Certain skeptics wave away this advice or, most of the time, are simply ignorant of it—even while the disease in Cameroon is reaching proportions that bode ill for the future. According to the latest figures put out by the World Health Organization (WHO), there are currently 243 declared clinical cases and the prevalence rate is 1 percent, or an estimated 110,000 HIV-positive people in a population of 11 million inhabitants. But as Dr. Monny Lobe points out, those figures are just the tip of the iceberg—they are far from reflecting the whole reality.

Indeed, one wonders how many people have died of AIDS in the hinterland without ever having been in a hospital, and whether it is even possible to count all those who have died after multiple treatments from our traditional medical practitioners.

## CONGO

### Group Reports AIDS Figures to Conference

*AB2303141891 Dakar PANA in English 1307 GMT  
23 Mar 91*

[Text] Brazzaville, 23 March (ACI/PANA)—Congo's anti-AIDS campaign group, the AIDS Health Association, has warned that the number of HIV-infected people in the country could rise to 19,000 carriers in 1992 from the current available 1990 figure of 2,405 people.

In a report to the on-going national congress in the Congolese capital Brazzaville, the association said the 1990 figure represented one out of 20 people or five percent of the population as having been infected by the human immune-deficiency virus (HIV) which causes the Acquired Immune Deficiency Syndrome (AIDS).

It said that 15 percent of all the people admitted to the main hospitals in Brazzaville and Pointe Noire, the



country's two main cities, were AIDS patients from all social and professional groups.

The association asked for more government involvement in the campaign to prevent the disease from spreading further, adding that its steep increase called for political solutions to the problem. It also called for the closure of pharmacies run by non-professionals to ensure that people received the right medicine.

## GHANA

### Committee Reviews Performance of AIDS Control Program

AB3003131091 Accra Domestic Service in English  
1800 GMT 27 Mar 91

[Excerpt] A national AIDS Review Team today presented its report to the Ministry of Health in Accra. The review team examined the progress and efficiency of AIDS control programs. Hanna Adukyea Amakye witnessed the presentation of the report: [Begin Amakye recording]

The review, jointly sponsored by the Ministry of Health and the World Health Organization, was also meant to examine the relevance of such programs and suggest measures to improve the implementation of the AIDS control program. Areas considered included finance, education, communication, and blood transfusion. The team found out that there are no clear cut policies on who is responsible for the formulation and implementation of the AIDS Control Program.

It explained that the National AIDS Control Program is not decentralized enough for the effective implementation of programs, and in most cases, regional and district committees either do not exist or are inactive. On information, education, and communication, much is said to have been achieved within the first year of the medium-term plan especially by non-governmental organizations.

The report however noted that more would have been achieved in this area if conditions and work environment had been more favorable and encouraging. According to the report, the AIDS Control Program lacks funds at the regional and district levels. It said only few health personnel have participated in workshops on AIDS. In the light of these problems, the report recommended the strengthening of the Health Education Division through training and the provision of equipment. It also advised that the industrial sector should be included in the information, education, and communications, technical advisory subcommittee.

In a speech, the secretary for health, Nana Akuoku Sarpong, emphasized the government's concern over the AIDS situation in the country. [passage omitted]

## KENYA

### Health Ministry To Study Anti-AIDS Drug

91WE0282A Nairobi DAILY NATION in English  
9 Feb 91 p 3

[Article by Otula Owuor: "Kemron Study in Hospitals Begins"]

[Text] The Ministry of Health has started a six-month study of the anti-AIDS drug, Kemron, in provincial hospitals, the director of medical services, Professor J. Oliech, said yesterday.

Prof. Oliech, who was closing the 12th annual medical scientific conference at the Kenya Medical Research Institute (Kemri), said:

"The Ministry was ready to take tangible research findings from the conference proceedings to utilise them in uplifting the national health care system."

He said that the Ministry was keen on picking up results from research—on highland malaria, meningitis, plague, cholera and others—which could help the country to control epidemics.

The presiding chairman, Professor G.P.M. Mwaluko, from Tanzania, said that the conference had set high standards.

He praised the local media for covering the proceedings.

He said that there was a need to work out a system that would make it easy for the research findings to be put into practical use.

### STD Program To Complement AIDS Control

91WE0282B Nairobi SUNDAY NATION in English  
10 Feb 91 p 12

[Article by Constantine Owuor]

[Text] The Government is committed to controlling sexually transmitted diseases (STD) and has developed a two-year National STD Control Programme (NAS COP) to complement the National AIDS Control Programme.

Delegates attending the Fifth Pan African Congress of Dermatology of the African Association for Dermatology (AFRAD) heard this at the Kenyatta International Conference Centre, Nairobi, where the congress opened last Wednesday.

In a presentation, Dr. M. Kahindo and Dr. J. Labeuw, of the STD Control Unit in the Ministry of Health, said Kenya has a population of 23 million of which approximately half is over 15 years of age and thus at risk of acquiring the human immunodeficiency Virus (HIV) infection and sexually transmitted diseases (STD).

**Insurance**

The rationale for this new programme is two-fold: HIV infection and conventional STD are transmitted in similar ways and some STD such as genital ulcers, facilitate the transmission of HIV. STD control, therefore, serves to curb AIDS.

Secondly, STD are important causes of morbidity and mortality. They influence female reproductive health and outcome of pregnancy, the two experts said.

The Kenya National STD Control Programme has four main areas of activities.

1. Training through updating of curricula in medical and paramedical education programmes, on the job training, distance education for health workers and training of traditional birth attendants and healers.
2. Clinical services and laboratory facilities, the development of a national clinical and laboratory referral system and of an essential drug and laboratory kit for STD.
3. The incorporation of an STD component in the AIDS information, education and communication programme.
4. Lastly, the inclusion of STD surveillance in the HIV sentinel surveillance system.

Dr. D.M. Owili, chief consultant Dermatologist, at the Kenyatta National Hospital, said that when AIDS was first recognised, the disease seemed limited to a single nation and a single group characterised by the sexual orientation. But today it has become a global problem.

He said although the immunologic consequences of HIV infection seemed similar in Africa and in Western countries, the epidemiology and clinical features of HIV infections in Africa were quite particular, depending on cultural, environmental, socio-economic and other unidentified factors.

Dr. Owili told the delegates that the clinical presentation of AIDS in Africa was rather different from those seen in Europe and America. The differences are linked to different spectrum of latent infections owing to environmental factors common to developing countries of the tropical area.

He said the most characteristic clinical presentations of HIV infections in Africa were diarrhoea, loss of weight and persistent fever.

Dr. Owili told the meeting that the steady increase in the number of cases diagnosed in Africa "is a warning," and he wondered how Africa would cope with this problem.

Dr. Owili stressed that given the present economic structure in most of Africa, countries must be involved in prevention, efficient cost effective diagnosis, treatment and rehabilitation of the increasing number of AIDS victims.

**AIDS Victims' Care To Shift From Hospitals to Homes**

*AB1004130091 Nairobi Domestic Service in English  
0400 GMT 9 Apr 91*

[Text] The head of the Kenya National AIDS Information, Education, and Communication Subcommittee, Dr. Sobi Mulinde has said that the management of AIDS victims will shift from hospitals to home-based care. He called on the general public for their support in the new approach in order to cope with the large number of AIDS cases in hospital confinement. Dr. Mulinde was addressing leaders attending a two-day workshop on AIDS control in Kakamega. He pointed out that care provided to patients within their own communities has positive psychological effects, reduces costs for relatives, and will create more beds for the hospitals for other emergency cases. Stressing that there was still no cure for AIDS, Dr. Mulindi called on leaders to spearhead the campaign on AIDS awareness in their communities to help curb the spread of the scourge.

**MOZAMBIQUE****Red Cross Conducts AIDS Program in Nampula**

*91P40194A Maputo NOTICIAS in Portuguese  
26 Feb 91 p 8*

[Text] The AIDS program set up by the Mozambican Red Cross in Nampula has benefited 1,032 war-displaced persons who have been settled on the outskirts of Nampula and Nacala Port and Monapo districts. The Red Cross AIDS program is carried out by volunteers who were trained in October and are now working in the settlement camps, giving lectures and distributing pamphlets and condoms.

The head of the Red Cross delegation in that part of the country, Lucia Assane, believes that the work has produced positive results, since attendance at the lectures is steadily increasing. According to Lucia Assane, evaluation of the program is done through surveys which yield information as to the number of people taking part in the program. "By evaluating the results and the number of condoms distributed, we can conclude that the program is being accepted by the target group," she said.

Lucia Assane explained that the reason the program has been limited to three districts rather than implemented throughout the province is that it is recent and appropriate conditions do not yet exist for expansion. Furthermore, the inaccessibility of some of the districts because of war restricts the activities of volunteers.

The program, financed by the Swedish Red Cross in cooperation with the Ministry of Health's AIDS coordination center, expects to branch out to the rest of the province this year, if circumstances permit. It is currently operating in refugee centers in the Muatala, Namico, Napipine, Murrapaniua, and Natikir areas of the city, in addition to the districts named.

### Official Reports 189 Confirmed AIDS Cases

*MB0104180391 Maputo Domestic Service in Portuguese 1030 GMT 1 Apr 91*

[Text] Ricardo Trindade, an official with the AIDS Coordinating Center in the Health Ministry, has told our correspondent that 189 confirmed AIDS cases have been diagnosed in the country. The source said that at least 50 percent of the patients might have died.

The AIDS Program does not have the exact number of deaths as many of the infected persons have not been admitted to hospitals.

Ricardo Trindade revealed that in February alone 19 new AIDS cases were diagnosed in Maputo, Gaza, Tete, Manica, Nampula, and Cabo Delgado Provinces, and in Maputo city. He added that most of the people infected with AIDS are aged between 20 and 39.

### Nine Cases of AIDS Detected in Maputo Province

*MB2504210091 Maputo Domestic Service in Portuguese 1730 GMT 25 Apr 91*

[Text] A total of nine cases of AIDS was detected in Maputo Province over the past 12 months. This was revealed by AIDS Prevention Coordinator Andre Simbine. Speaking at the Mozambique Red Cross headquarters during the first anniversary of AIDS Prevention Program, Andre Simbine said that more than 1,100 people were able to attend educational lectures held during this period.

## NIGERIA

### Predicting 83,000 AIDS Deaths by 1995

*AB2503164091 Paris AFP in English 1527 GMT 25 Mar 91*

[Text] Lagos, March 25 (AFP)—Nigeria, the world's biggest black nation with a population of about 120 million, is expecting 83,000 deaths from AIDS during the period covering 1991 until end 1995, Health Minister Professor Olikoye Ransome-Kuti said Monday in Ota, near here. Women would make up half this total while children would be about 29,000, he said opening a conference on AIDS for health workers, organised by the Nigerian Medical Association (NMA).

Last year, World Health Organisation (WHO) estimated that there were 154,000 HIV-infected persons in Nigeria, 8,000 of whom are already down with the disease. There were about 5,000 newly-born babies infected by the virus in the same year, the minister said. The prevalence of the disease in Nigeria is about 45 per 10,000 persons, based on the population already tested, he said. The rate rose from 3 to 12 percent among prostitutes in the country over the last three years.

In the first week of last month, a total of 323,399 cases of Acquired Immune Deficiency Syndrome have been officially notified to WHO from 156 countries. Of this figure, 83,000 were from Africa, he said. But between eight and 12 million persons are believed to be carrying the HIV virus, including 3 million women. More than 500,000 are children. AIDS would be the number one killer disease in Nigeria in the 1990's and in the year 2,000 and beyond "if precise steps are not taken now", Vice President Augustus Aikhomu told the conference which is organised as part of a national efforts to combat AIDS and provide guidelines for health workers on the disease.

### Health Ministry Pledges To Check Spread of AIDS

*AB2804230091 Lagos Domestic Service in English 0600 24 Apr 91*

[Text] The federal Ministry of Health has reaffirmed its determination to check the spread of the Acquired Immuned Deficiency Syndrome, AIDS, in the country. The minister, Professor Koye Ransome Kuti, gave the pledge in Calabar in a message to the opening of a four-day national training workshop on AIDS prevention in Nigeria. Femi Babade was there: [Begin recording]

Prof. Ransome Kuti pointed out that it was to demonstrate this that a medium-term plan for the prevention and control of AIDS in the country focused on the prevention of sexual transmission of HIV. He explained that the high rate groups will be educated through sustained and accurate dissemination of information on how to preserve themselves and their partners from contracting infection.

The minister's address was delivered by the assistant national AIDS program coordinator, Dr. Jimola Oramo. He expressed delight that those in the high rate groups are now likely to be identified and reached. Prof. Ransome Kuti, however, stated that the task could not be achieved by government alone, even with the best of intention and especially in the light of deepening economic recession. [end recording]

## SOUTH AFRICA

### Figures Show High AIDS Increase in Natal-Kwazulu Region

*MB2003072191 Umtata Capital Radio in English 0500 GMT 20 Mar 91*

[Text] New figures show AIDS is increasing dramatically in Natal. Carmel Rickard has details on the shock findings:

Rickard: The latest figures indicate that in the Natal-Kwazulu region 100 people a week are being confirmed as HIV positive, and a total of more than 3,590 people have so far been confirmed as HIV positive.

According to AIDS expert, Denis Paterson of Natal University's medical school, the situation has reached such proportions that the blood bank has to avoid collecting blood in certain areas, because the level of HIV positive was so high among would-be donors there.

Speaking at a conference in Durban yesterday, Paterson said that at one stage last year, one in 50 black women blood donors carried the HIV virus. Areas of high population density tended to produce more people testing HIV positive. These areas included Durban, Pietermaritzburg, and Richard's Bay.

## SWAZILAND

### Report Details AIDS Figures for December 1990

*MB0404115591 Mbabane THE SWAZI OBSERVER in English 4 Apr 91 p 1*

[Report by Albert Masango: "30 More Added to AIDS' List in December"]

[Text] Mbabane—About 30 people were in December diagnosed to be suffering from the deadly AIDS and some are reported to have since died.

This is contained in a report by the AIDS Control Unit in the ministry of health. But the exact number of those who have since died is not reflected.

There was also no immediate comment from officials of the control unit nor from the ministry.

Statistics further showed that of the 30 people affected, 17 were males and 10 females while three of them were not specified.

The AIDS victims ranged from babies to elderly persons above 60 years of age.

Most people who have contracted AIDS were between 15 to 29 years. These were followed by people who were above 60 years and newly born babies.

There were some AIDS victims aged between nine and 14 years.

Separate reports from Reuter said that world AIDS toll jumped 10 percent in the first quarter of this year, according to the World Health Organisation (WHO).

The report said the total, which rose to 345,533 from 314,610, was reported from 162 countries.

It included 11,318 new cases in March.

WHO, which says many nations under-report their AIDS figures, believes the true number of those with Acquired Immune Deficiency Syndrome, may be closer to 1.3 million.

The United States reported the highest total, 167,803 cases, an increase of 6,515 in March and 13,012 over the quarter.

The report said that Uganda continued to lead Africa with 17,422 cases, a figure not updated since the beginning of the year.

### Health Official Reports 3.6 Percent Rise in HIV Infection

*MB1304100191 Mbabane WEEKEND OBSERVER in English 13 Apr 91 p 1*

[Report by Vusi Sibisi: "AIDS Figures Shock"]

[Text] Mbabane—The Director of Health Services, Dr. John Mbambo, yesterday warned that unless the National AIDS Prevention Control programme was intensified, the killer disease would decimate the population.

Dr. Mbambo said while he was not an alarmist, there was good enough reason for one to be alarmed at the rate the disease was spreading.

He was particularly alarmed by the 3.6 percent rise in the number of people who have tested positive in the first quarter of this year, the Human Immunodeficiency Virus (HIV) infection test covering January up to the end of March.

He said during this quarter, 1 208 people were tested for the HIV and of this sum, 43 tested positive. This, he said reflected a 3.6 percent positivity rate rise in relation to figures for the last quarter for 1990 where 1 715 people were tested and 44 tested positive—representing a positivity rate of 2.5 percent.

"The 3.6 percent positivity rate is good enough reason to cause alarm," Dr. Mbambo said, before adding that four babies had been found to have the HIV infection.

"The mother to child transmission is becoming a big problem, one we must plan for before it is too late," he said.

He said since the beginning of the AIDS programme in 1987, there were 35 reported cases of infected people and 2 deaths.

But he warned that this could be a tip of the iceberg since there may be cases which were not reported. He believed that there were many cases which went unreported.

"The reporting system is not perfect yet," he said. "There is a lot of under-reporting and a lot has to be done to improve this area because all we know is that we are feeding the public on wrong statistics."

He said new forms of reporting AIDS cases had already been developed and these would soon be distributed to health workers all over the country.

Dr. Mbambo said the ministry of health owed a lot of gratitude to those doctors who had co-operated by reporting suspects and cases though he conceded that many cases still went unreported.

"We hope more doctors will join this struggle to combat this pandemic," he said. "The ministry's attitude is to be open about this disease and the information, education and communication component of the AIDS programme needs further strengthening."

World Health Organization (WHO) experts from the global programme on AIDS which is based in Geneva, he said, were in the country to review the operation of the AIDS programme in its medium term plan.

Dr. Mbambo said they were looking forward to the report by the WHO experts after which they hoped to initiate a lot of activities before the end of the year, in a concerted bid to contain the AIDS menace.

He said to date, the ministry had trained about 95 AIDS counsellors. These counsellors, he said, were available to the public.

## TANZANIA

### AIDS Figures for Western Region Supplied

*EA1104194591 Dar es Salaam Domestic Service in Swahili 1700 GMT 11 Apr 91*

[Text] Kigoma—Ninety-two villages in Kigoma region have AIDS patients, and 45 of these patients have already died of the disease, while 145 are still suffering—all this in the last nine months. The coordinator in charge of AIDS control in Kigoma region, Ndugu Emanuel (Mtisi), said that the Kigoma urban area now leads with the largest number of AIDS deaths and patients. He disclosed that the reasons for this were the population increase and the unchanging habits of some of the area's people involving prostitution, which is the main factor spreading AIDS.

## UGANDA

### Joint Research Into Local AIDS Virus Planned

*91WE0289 Kampala THE NEW VISION in English 8 Mar 91 pp 8, 9*

[Article by Ndyakira Amooti]

[Excerpt] Uganda Virus Research Institute UVRI, and the British Medical Research Council MRC, are to begin a study on the nature of AIDS virus present in Uganda. The isolation of the types of human immunodeficiency virus HIV would help in the future trials of possible AIDS vaccine or drugs.

A memorandum of understanding to this effect has been signed between the government of Uganda and MRC. The Director of Medical Services (DMS) Dr. Eriab Muzira signed for the government and the Director of AIDS Directed Programme ADP of MRC, Dr. Geoffrey Schild signed for MRC.

Dr. Schild, who headed a four-man team of immunologists, virologists and epidemiologists from MRC, said at the end of this visit to Uganda recently, that research will be carried out by the UVRI and MRC directed at detailed analysis of the structure of HIV, the virus that causes AIDS, and the degree to which it varies in Uganda.

Dr. Schild who is also chairman of Biological Committee on WHO's Global Programme on AIDS (GPA) said the AIDS virus varies in several ways.

He stated that the virus varies as it progresses in an individual, between individuals and on geographical basis.

"Understanding such variations of the AIDS virus is essential in helping to design and develop possible vaccine or drugs for AIDS," said Dr. Schild. He, however, pointed out that there is candidate vaccine at present.

## ZAMBIA

### Kaunda Warns Zambians Against Loose Sexual Behavior, AIDS

*MB2303201691 Lusaka Domestic Service in English 1800 GMT 23 Mar 91*

[Text] President Kaunda today warned the nation against loose sexual behavior to avoid the redoubling of the current AIDS figures. Speaking when he officiated at a Women's Day celebrations at the Freedom Statue, Comrade Kaunda said the current figures of AIDS in the country were alarming and called on the people to change their social behavior and save the nation from perishing by the year 2000. He commended the UNIP [United National Independence Party] Women's League for the well organized women day, saying it was more successful than last year's.

## ZIMBABWE

### Aphrodisiacs Said Instrumental in Spread of AIDS

*MB3103154291 Johannesburg SUNDAY STAR in English 31 Mar 91 p 6*

[Article by Robin Drew, AFRICA NEWS SERVICE: "Sex Drugs Blamed for Spread of AIDS"]

[Text] So-called wonder drugs concocted from insects and blister beetles which were thought to heighten sexual desire, were sold in beerhalls and pubs and contributed to the spread of AIDS in Zimbabwe.

The disease is already responsible for 1,000 officially recognised deaths in the country.

A pilot study of patients attending a Harare clinic showed that in 60 to 80 percent of cases concerning sexually transmitted diseases patients had used aphrodisiacs.

This figure was given by a University of Zimbabwe researcher at a meeting in Harare of African medical students.

They were told that in Africa, the use of aphrodisiacs was widespread and it was possible this was a factor contributing to the promotion of HIV infections, but to ask people to abstain totally from sexual activity as a means

of AIDS prevention was unrealistic. Sex education and counselling should be part of the school curricula.

The researcher, Norman Nyazema, called for an open debate on sexuality and AIDS.

The meeting also heard that a survey at Wits University [University of the Witwatersrand] showed that most students did not consider themselves to be at risk of contracting AIDS.

Only one quarter of the students interviewed said they used condoms.

### Herbal Medicine for AIDS Treatment Produced

91WE0087A Beijing RENMIN RIBAO in Chinese  
6 Oct 90 p 4

[Article by Ai Xiao [5337 4562], RENMIN RIBAO reporter: "Chinese Medicine 'Hong Bao' Exhibits Amazing Therapeutic Effect, Restores Immune Function"]

[Text] Professor Zhang Beisong [1728 0554 1529] and co-workers at the Chinese Military Medical Sciences Academy have developed a very effective immune function strengthening drug, "Hong Bao" [4767 1405], which has been derived entirely from traditional Chinese medicines. Results of a clinical trial of this drug, conducted by Dr. Shan Ka La [phonetic] of the AIDS Control Center in California, on 18 cases over nine months are encouraging. The international medical community is excited about the prospects for therapies that combine the best of traditional Chinese medicines and modern Western medical technology to conquer AIDS.

In China, "Hong Bao" has been used to restore body immune function for old people; it also has a remarkable effect in improving disorders associated with "kidney deficiency," such as headache, fatigue, chest tightness, poor appetite and insomnia. For cancer patients, in addition to alleviating symptoms, this drug can also raise their immune function index. Treatment with "Hong Bao" also lowers the virus level in hepatitis B patients as indicated by diagnostic assay.

The collaboration between Zhang Beisong and Shan Ka La began in March last year and "Hong Bao" was sent to the AIDS Control Center in California for clinical trial in San Francisco. Approximately 70 percent of AIDS patients receiving therapy with "Hong Bao" alone have experienced significant increases in immune function index in one month; in one unique case, the index was raised more than 10 times in four months. Another 20 percent of the patients in the study also responded well to the treatment; their conditions were generally stabilized and the once-unrelenting progress of the disease appeared to be checked. Further tests have shown that "Hong Bao" is no less effective in raising T4 lymphocyte vitality in patients than the most prominent drug in AIDS treatment, AZT. In addition, "Hong Bao" is also a potent agent in elevating the level of p24 antibody, a clinical diagnosis index for AIDS specificity.

The clinical trial data was presented, in part, at the Fifth International Conference on AIDS in June 1989 (Montreal), American Conference on AIDS in October 1989 (San Francisco), and the Sixth International Conference on AIDS in June 1990 (San Francisco), respectively and has generated deep interest and enthusiasm in the medical community.

### Series of Herbal Medicine for AIDS Treatment Introduced

91WE0087C Taiyuan SHANXI RIBAO in Chinese  
12 Oct 90 p 3

[Article: "Series of Herbal Medicine for AIDS Treatment Introduced by Medical Specialists," Source: Xinhua News Agency]

[Text] Capitalizing on their researches on the application in AIDS treatment conducted abroad, a group of Chinese medical specialists have recently developed a line of remedies for AIDS treatment. The remedies, named "Tai Shi" [0100 1102], have been introduced into many countries and regions where there is an AIDS epidemic.

The "Tai Shi" remedies are color-coded in white, yellow, red, and green for use with different phases of the disease and come in the form of tablets, pills, capsules, powders, and oral tonics. All told, there are 28 various types and forms of "Tai Shi" remedies. The white type treats opportunistic infections; the yellow alleviates and eliminates symptoms; the red strengthens body resistance to consolidate the constitution and restore immune function; and the green prevents infection.

### More AIDS Cases Involving Chinese Citizens

91WE0087B Beijing RENMIN RIBAO in Chinese  
19 Oct 90 p 3

[Article by Feng Junjun [7458 6511 6511], RENMIN RIBAO reporter: "Two AIDS Cases Involving Chinese Citizens Reported, Every Person Is Advised To Exercise Abstinence and Self-Control To Protect Himself From Infection"]

[Text] Beijing, 18 Oct—AIDS ADVISORY: Dai Zhicheng [2071 1807 3397], director of the Department of Disease Control, the Ministry of Public Health, today confirmed the report of the first discovery of two AIDS cases in residents of mainland China. One of the patients was a farmer in the province of Yunnan; the second, a resident in Beijing. Both patients are now dead.

Dai Zhicheng said, in addition, 250 more cases tested positive for HIV antibodies have been reported from January to September of this year. This pushes the total count of people with HIV infection to 446. A breakdown showed that 68 cases are aliens and 378, Chinese citizens residing on the mainland, of which 368 are in Yunnan. These statistics came as a result of monitoring a population of 300,000 of high-risk groups in China by means of AIDS serological test. Of the five diagnosed AIDS cases, three patients came from abroad and two were Chinese residents.

According to Dai Zhicheng, a preliminary investigation had shown that AIDS virus was first carried into China in the early eighties. Its spread was, at one time, very severe and some wide, localized epidemics had been discovered. Epidemiologically, AIDS is transmitted through either blood or sexual intercourse. One of the

two Chinese AIDS patients is known to have had a history of drug abuse and wanton practices; the second patient could have been infected through a blood transfusion.

Dai Zhicheng emphatically pointed out that at present, when no effective measures to prevent and cure the HIV infection are available, public health education programs are essential. He urged our citizens to exercise abstinence and self-control to protect oneself from infection.

Since the discovery of the first AIDS case in Beijing Union Hospital in June 1985, public health services have included the prevention and control of AIDS as one of the key programs in our national infectious disease control effort. As of today, the spread of AIDS is monitored and tracked in nearly every province, municipality, and autonomous region. The Ministry of Public Health has also funded three HIV antibody diagnostic laboratories at the Chinese Academy of Preventive Medical Sciences, Shanghai Sanitary and Anti-Epidemic Station, and the Academy of Military Medical Sciences respectively. In addition, the Traditional Chinese Medicine Administration and other public health agencies have initiated investigation in AIDS prevention and control with traditional Chinese medicines as well as using laboratory animals as study models to rein in the AIDS virus. A three-year program for the second phase of AIDS prevention and control has been instituted with the assistance of experts from the World Health Organization as well.

### Few Addicts Know How to Avoid AIDS

91WE0219 Hong Kong HONG KONG STANDARD  
in English 3 Dec 90 p 4

[Article by Denise Wong]

[Text] Most active drug abusers know that AIDS can be contracted through sharing of needles, but few know how to take preventive measures against the fatal disease.

That was one of the findings of the territory's first survey on AIDS awareness among addicts.

The survey, conducted by the Society for the Aid and Rehabilitation of Drug Abusers (SARDA), also revealed that about 9 percent of addicts using injection were still sharing needles with others.

About 90 percent of the 490 survey respondents, who used SARDA's inpatient treatment from last August to October, took heroin by injection.

Forty-six percent said they have never shared needles, while another 45 percent said they had stopped for at least three months at the time of the survey.

William Tang, SARDA's superintendent of social services, said the incidence of needle-sharing "is very low."

"But it does not mean that Hong Kong has little threat of spreading AIDS among addicts," he said.

"Once having contracted the fatal disease, addicts—even a very small number—can spread it very rapidly, as they can also pass it around through other means."

Reasons quoted by the 39 addicts still sharing needles included the availability of needles, the convenience, and the enjoyment of companionship.

Of the 193 people in Hong Kong with AIDS, four contracted the virus through intravenous drug use.

Almost all of the 490 respondents said they had heard of the needle-sharing risk from the mass media.

But at least six who are still sharing needles admitted they did not believe the message.

Mr. Tang said the survey revealed that only a very limited number of addicts—less than 3 percent—know how to avoid getting AIDS.

The methods include safe sex (by using condoms) and sterilising of syringes.

In response, Mr. Tang said his society was planning to incorporate sex education into its counselling programmes.

"Given that many drug addicts like to use prostitutes, while the female addicts are usually involved in the trade, sex education for them is vital," he said.

Dr. Patrick Li, head of the Government AIDS Counselling and Health Education Service, said they had to rely on social workers and volunteers to provide practical AIDS prevention knowledge to the addicts.

He said they had the needed educational materials for rehabilitation workers.

Both Mr. Tang and Dr. Li said that as the SARDA survey was on addicts already seeking treatment it might not be representative of the rest.

The Central Registry of Drug Abuse recorded 39,100 active drug abusers last year. But narcotics officials believe there are some 20,000 unreported cases.

Mr. Tang said he hoped that SARDA's outreach programme could start contacting unmotivated hard-core addicts at various black spots by the middle of next year.

Besides persuading addicts to take part in detoxification programmes, social workers and ex-addicts might also help in spreading the AIDS prevention message.

### Chinese Medicine for AIDS Treatment

91FE0464 Beijing RENMIN RIBAO OVERSEAS  
EDITION in Chinese 7 Mar 91 p 8

[Article by Yang Mingliang [2799 2494 0081]: "Twilight To Cure AIDS Using Chinese Herbal Medicine"]

[Summary] The Traditional Chinese herbal medicine which brought many encouraging results in AIDS treatment has been believed to be the remedy for treating 'the



pestilence of the 20th century'. The pharmacological principles of using traditional Chinese medicine in AIDS treatment are: (1) Prevent HIV attack—For example, in Africa the onset rate of some HIV carriers who took Chinese herbal medicine is only 1 percent after one year of preventive treatment in contrast to the 8 percent onset rate of those who did not take the medicine. (2) Improve patient's condition—Long-term herbal medicine intake can improve patient's appetite, reduce fever, regain weight, stop diarrhea, reduce sizes of tumor and lymph-node, recapture patient's hemogram and strength. (3) Attack and kill HIV virus—Research results revealed by the University of Florida in U.S. shows that the extract from the cones of five-needled pine is very effective in inhibiting HIV viral infection. In addition to pine cone, others such as trichosanthes root, *Bulbus allii* (garlic) extract, burdock fruit, purple cistanche, green chiretta, climbing ragwort, ricin, and ternate buttercup root also have certain degrees of anti-AIDS virus activity. (4) Strengthen body resistance to eliminate pathogenic factors—The idea of differentiating symptoms and signs of the traditional Chinese medicine may be the guidance for AIDS treatment. The idea emphasizes on nourishing 'yin' to promote body fluid production in the patient, and eliminating pathogenic dampness in order to detoxify poisonous materials in the body. Many Chinese

herbal medicines have the capability of fulfilling the above purpose—to alleviate symptoms and kill pathogens.

#### **Symposium on Hepatitis, AIDS Held in Beijing**

*OW1604062891 Beijing XINHUA in English  
0608 GMT 16 Apr 91*

[Text] Beijing, April 16 (XINHUA)—An international symposium on the hepatitis and AIDS viruses opened in Beijing Monday.

A total of 198 Chinese and foreign experts are attending the meeting.

During the four-day meeting, Chinese and foreign experts will present 140 papers and exchange experience in using Chinese traditional medicine and western medicine to prevent and cure hepatitis and AIDS.

Hepatitis is presently of greatest concern in China. The incidence of the infectious disease is 120 per 100,000 persons.

On the other hand, some 493 citizens in China are reported to be infected with the AIDS virus.

**BURMA****Health Department Sponsored AIDS Training Course**

91WE0283A Rangoon *THE WORKING PEOPLE'S DAILY* in English 26 Feb 91 p 7

[Text] Yangon, 25 Feb—A Training course on HIV and AIDS jointly sponsored by Health Department and Yangon Division Health Department was opened with a ceremony in the meeting room of the Yangon Division Health Department with a speech by Division Health Department head Dr. Daw Hnin Yi.

Present on the occasion were Deputy Division Health Department heads, Division Health Officers, lecturer from VD department, VD Specialist Dr. U Aye Nyein, Health Education Bureau Deputy Director Dr. Daw Yin Yin May, AIDS research team leader Dr. U Swe Myint and members, Division Health Education Officers, Child Health Officers and trainees among others.

**Authorities Lists Prevention of AIDS as National Task**

OW1304110291 Beijing *XINHUA* in English 1037 GMT 13 Apr 91

[Text] Yangon, April 13 (XINHUA)—The Myanmar authorities have listed prevention of the AIDS disease as a national task to be carried out by the entire people of the country.

Maj-Gen Khin Nyunt, secretary of the State Law and Order Restoration Council (SLORC), who is concurrently chairman of the National Health Committee, made the remarks on Friday when he delivered an address at the committee's seventh meeting here.

The SLORC secretary said that "the infection of the disease in areas becomes widespread through cross-border trade and so."

Khin Nyunt said that educative and preventive work against AIDS disease must be accelerated more than at present.

He added that "as a first priority, projects are to be laid down for border areas, and then, the task is to be extended throughout the country."

Khin Nyunt pointed out that "all kinds of health personnel will be trained and turned out to enable the health activities to gain success."

At the meeting, Pe Thein, minister for health and education, explained that international organizations are ready to render help in educative and preventive work on the disease and personnel concerned are to carry out the task as a national duty.

**HONG KONG****District Board Member Suggests Ban on AIDS Mothers**

91WE0271 Hong Kong *SOUTH CHINA MORNING POST* in English 27 Jan 91 p 4

[Text] Women known to be AIDS carriers should be banned from having babies, a Wan Chai District Board member who is standing for re-election in the March polls said yesterday.

"Until we know how to suppress the virus that is the best thing to do," said Dr. Albert Cheung Chi-piu, predicting the number of locals infected with the virus that leads to AIDS would soar past the 10,000 level within the next few years.

He called for prostitutes diagnosed as carrying the human immunodeficiency virus (HIV) to be barred from plying their trade in local red-light districts, although he declined to single out Wan Chai as a particularly high-risk area.

"If they are AIDS carriers then they should be forbidden by law from having any other business with their profession," Dr. Cheung said, admitting, however, there would be practical difficulties in enforcing any such ban.

The biochemist and company director—who has represented the Happy Valley constituency for the past eight years—revealed yesterday he was quitting the middle-of-the-road Hongkong Democratic Foundation (HKDF).

The District Board member, who is being challenged by two other candidates in the double-seat Happy Valley constituency, said he was confident of bettering his 1988 performance, when he polled 1,350 votes and came second in the seat.

His two challengers are solicitor Ms. Helen Chung Yee-fong and executive director Mr. Ng Kam-chun.

**Another Confirmed AIDS Case**

OW2703194691 Beijing *XINHUA* in English 1614 GMT 27 Mar 91

[Text] Hong Kong, March 27 (XINHUA)—One more case of AIDS (Acquired Immune Deficiency Syndrome) has been confirmed, bringing the total number of cases in Hong Kong to 46, a spokesman for the Department of Health said here today.

So far, a total of 32 AIDS patients including the new AIDS sufferer have died and 14 others are either under counselling and treatment or have left Hong Kong, the spokesman said.

Releasing the statistics on the AIDS surveillance program for last month, the spokesman said three more men were found to be positive for the HIV antibody test, bringing to 168 the total number of HIV carriers who have not yet developed AIDS.

Under the AIDS surveillance program which started in 1985, a total of 186,820 blood specimens have been tested for the AIDS virus.

## MALAYSIA

### Minister Says 948 People Detected as HIV Carriers

*BK2503111291 Kuala Lumpur NEW STRAITS TIMES in English 22 Mar 91 p 11*

[Excerpt] Kangar, Thursday—About 948 people in the country have been detected to be HIV carriers, Health Minister Datuk Lee Kim Sai said here today. He said a majority of the HIV carriers were drug addicts.

Speaking to reporters after visiting the Kangar General Hospital here, he said that of the number, 32 HIV cases were in Perlis.

"The number is quite big in Perlis in view of its population of only 180,000," he said. But out of the 24 AIDS cases detected in the country, none were from Perlis, he added. [passage omitted]

## SINGAPORE

### Three Men Infected With AIDS Virus in February

*BK0404102491 Singapore THE STRAITS TIMES in English 30 Mar 91 p 21*

[Text] Three Singaporean men were found to be infected with the AIDS virus last month. Of the three, two had already developed AIDS when they sought treatment, a Health Ministry statement said.

The three men, aged between 20 and 30, are believed to have been infected through sexual contacts here and overseas.

During the month, two AIDS patients died.

To date, 69 Singaporeans have been infected with the virus. This figure includes 28 who developed AIDS, 18 of whom have died.

Among the 69 are 40 carriers without symptoms of the disease and one with the AIDS-related complex.

The Ministry of Health was also notified of 27 cases of infectious syphilis and 249 cases of gonorrhoea last month, compared with 20 and 312 cases respectively for February last year.

## THAILAND

### Burmese Cited as AIDS Carriers in Ranong

*91WE0286A Bangkok SIAM RAT in Thai 29 Jan 91 p 6*

[Excerpts] [passage omitted] After visiting the Public Health Office in Ranong Province, Mr. Den Tomina, the deputy minister of public health, said that many Burmese have come here to work. [passage omitted] In particular, many of these people are working as crewmen on fishing boats or as prostitutes. [passage omitted] Because of this, the incidence of AIDS in the province has increased greatly. The number of Burmese with the AIDS virus is about double the number of Thais with the disease.

Mr. Den said that the Ranong provincial Public Health Office has implemented a project to search for AIDS carriers and control this disease among the Burmese coming here to work aboard fishing boats and in other occupations. This project was launched in Pak Nam Subdistrict, Muang District, in order to search for people with this disease and prevent these Burmese from spreading the disease. Officials will provide information on this disease. They will also examine these Burmese for malaria and elephantiasis. A total of 18,450 Burmese who crossed into Thailand have been tested for AIDS, malaria, and elephantiasis. No one was found to have full-blown AIDS, but two people with AIDS-related symptoms were found (one has died and the other has been sent for treatment). A total of 426 people were found to have the AIDS virus, but they did not exhibit any symptoms. Of these 426 people, three have died, and another six have been sent for treatment. Of these, 138 are people who had come here to work temporarily. Steps are being taken in accord with provincial regulations to expel 177 of these Burmese. Fifty-nine have been returned to their homes, and 43 now live in Ranong Province.

Dr. Klahan Limsiriphat, the public health officer in Ranong Province, said that in carrying on this project, it has been found that the number of AIDS cases is increasing rapidly in all groups, particularly among prostitutes, prisoners, drug addicts, and crewmen aboard fishing boats. [passage omitted]

### Health Ministry Updates AIDS Statistics

*91WE0286D Bangkok NAE0 NA in Thai 15 Feb 91 p 3*

[Text] The AIDS Division, Department of Communicable Disease Control, Ministry of Public Health, reported that as of the end of 1990, 20 people with full-blown cases of AIDS were still alive. Of these, 17 are men, one of whom is homosexual, three are bisexual, and nine are heterosexual, three are intravenous drug addicts, and one received a blood transfusion. Of the three female patients, two are heterosexual and one caught the disease from her mother.

The report stated that the number of people with AIDS-related symptoms has increased. Of the 235 people with AIDS-related symptoms, 196 are men. Of these, 19 are homosexual, eight are bisexual, 73 are heterosexual, 85 are intravenous drug addicts, two received blood transfusions, two received the virus from their mother, and seven contracted the virus from an unknown source. Of the 39 women who have the virus, 33 are heterosexual, two are intravenous drug addicts, one contracted the virus from her mother, one received a blood transfusion, and two contracted the virus from an unknown source.

At present, 203 of the people with AIDS-related symptoms are still alive.

There are a total of 25,031 people with the AIDS virus who exhibit no symptoms. Of these, 19,797 are men, of whom 80 are homosexuals, 103 are bisexual, 2,652 are heterosexual, 14,702 are intravenous drug addicts, 21 received blood transfusions, and 2,239 contracted the virus from an unknown source. There are 5,234 women in this category, of whom 4,462 are homosexual, 596 are intravenous drug addicts, 14 received blood transfusions, and 162 contracted the virus from an unknown source. Today, 24,767 of these people are still alive.

The latest news report on AIDS stated that as of last January, there was a total of 26,144 people who had full-blown cases of AIDS or who had contracted the AIDS virus. This is an increase of 802 cases since the end of 1990. Of these, 88 have full-blown cases of AIDS, 260 have AIDS-related symptoms, and 25,916 have the AIDS virus but no symptoms.

Mr. Sakun Siphrom, the deputy minister of education, said that AIDS is now spreading rapidly among children and youths ages 5-25. A survey conducted among 2,000 lower secondary students in three provinces showed that 1.08 percent had the AIDS virus. The Ministry of Education has established a committee to take quick action on this problem.

### **Bangkok AIDS Profile Updated**

*91WE0286E Bangkok SIAM RAT in Thai 28 Feb 91 p 3*

[Excerpt] [passage omitted] Dr. Suphak Wanitseni, the director of the Narcotics Control and Rehabilitation Division, Health Department, Bangkok, discussed the AIDS situation in Bangkok since the first case of AIDS was reported in 1984 through 31 January 1991. A report issued by the Epidemiology Section, Communicable Disease Control Division, Health Department, Bangkok, stated that the statistics on the number of patients who live in Bangkok are as follows: 40 full-blown cases of AIDS, of whom 29 have died; 76 cases in which people have AIDS-related symptoms, of whom 4 have died; and 7,382 cases in which people do not exhibit any symptoms, of whom 66 have died.

The director of the Narcotics Control and Rehabilitation Division said that blood tests have shown that the

number of people testing positive for AIDS is increasing rapidly. Our rate of increase is the highest in the world. This is because Thailand is well-known for prostitution and narcotics. Those with the AIDS virus look just like any other person and appear not to have any symptoms for two to nine years. Prostitutes spread the virus to their customers. Each day, the number of people who contract the virus increases greatly. This is because they don't use condoms.

Dr. Suphak said that based on the first reports issued by the Ministry of Public Health, those with full-blown cases of AIDS were homosexuals, people who had received blood transfusions, or people who had been operated on abroad. Later on, the disease began spreading among prostitutes and drug addicts. Narcotics addicts can change their behavior so that they don't contract or spread the virus. They can do this by reducing the number of injections and not sharing needles. [passage omitted]

### **Activists Cite AIDS Worries as U.S. Navy Lays Over**

*BK2403133491 Bangkok THE NATION in English 24 Mar 91 p A3*

[Article by Ann Danaiya Usher]

[Text] As thousands of American military personnel are expected to arrive on the beaches of Phattaya today for "rest and recreation," a prostitutes' welfare group is warning sex workers to protect themselves, and servicemen to wear condoms to avoid the spread of AIDS in either direction.

A fleet of U.S. ships are scheduled to arrive at the popular beach resort today from the Persian Gulf with about 8,000 men aboard.

"Girls working with foreigners—whether they're tourist or soldiers—are really aware of the AIDS risk and many are insisting that their clients use condoms," said Chanthawipa Aphisak of Empower, which works with prostitutes in Bangkok.

She said some women complained that on past R and R stops they were abused by servicemen who refused to use condoms.

"Please don't mistreat the women," said Chanthawipa.

The Public Health Ministry estimates that there are between 200,000 to 250,000 people carrying the AIDS virus in Thailand today, with the rate of infection rising steeply among prostitutes and Thai men who frequent the sex industry.

Tourist provinces in the North and South show the highest levels of infection among sex workers, but the actual AIDS figures for Phattaya have never been made public by government officials.

When women's groups protested previous R & R stops, U.S. military officials argued that their men would not be spreading AIDS to prostitutes because they had all been tested before entering the forces.

But activists noted that there can be a time lag of several months between contraction of the virus and the growth of a sufficient level of antibodies to show up on a test, and men who have been in a war zone for several months may have caught the disease since their last tests.

Prostitutes working near U.S. military installments in the Philippines—Olongapo near Subic Naval Base and Angeles City near Clark Air Base—are tested regularly for AIDS to protect the servicemen.

But no known similar testing is done in Phattaya.

Local AIDS activists worry that with thousands of men arriving at once, the beach town becomes a magnet for sex workers not only in the Eastern region but also from around the country.

They fear that without the promotion of condom use, so much potential sexual activity could hasten the spread of AIDS in both directions.

Phattaya became well-known during the latter years of the Vietnam War when U.S. troops spent their furloughs at the Eastern beach resort. Since then the town has become infamous as a booming international sex centre.

Prostitution remains illegal in Thailand.

### **One in Eight Prostitutes Carries AIDS Virus**

*BK2803030591 Bangkok BANGKOK POST in English  
28 Mar 91 p 3*

[Text] About one in every eight "service girls" in Thailand is estimated to have contracted the deadly AIDS virus, according to the Thai Red Cross.

Its two-year field study revealed yesterday puts the number of prostitutes in Thailand at between 150,000 and 200,000.

The study, conducted by the agency's anti-AIDS project last year and in 1989, shows AIDS is spreading at an alarming rate, with an estimated 12 percent of prostitutes having the virus, according to Dr. Wirasit Sitthitrai of Chulalongkon University's Institute of Population Studies.

Government agencies estimate 200,000 to 300,000 people are already carrying the virus.

To tackle the problem, Dr. Wirasit said in addition to safe sex through use of condoms, the attitude of Thai men needs to be reformed.

"Stop blaming tourism and foreigners for prostitution," he said, adding the study shows most sex industry customers are Thai.

By sending researchers to gather first-hand information on the streets, the study was aimed at coming up with a reliable estimate of the number of prostitutes. So far, estimates by different agencies have been debatable, he said. Some put it at up to 700,000.

Dr. Wirasit said the study found the size of the sex industry varies from 150,000 to 200,000 prostitutes, depending on demand at different times.

While the Public Health Ministry said prostitutes in Bangkok totalled 28,000, the study indicates the figure is actually more than 40,000.

Prostitution had been increasingly hidden behind fronts such as cafes, where prostitutes are disguised as singers.

Those in the sex industry can be divided into three groups: Female, male, and child prostitutes.

Dr. Wirasit said the last group is driven into prostitution by broken homes and child abuse.

High rates of AIDS-infection are recorded among "service girls," rising to more than 50 percent in most provinces and to as much as 90 percent in some.

Dr. Wirasit said these high rates, which used to be confined to the North, have begun to spread to the South.

In Bangkok, the rate shot up from three percent in 1989 to 20 percent by the end of last year, he said.

About 20 million condoms have been distributed but their use remains limited, according to Dr. Wirasit.

Infection is increasing rapidly among women who got the virus from their husbands or partners and passed it on to their newly born infants.

As of last December, five out of 100 women who went to hospitals for pregnancy check-ups tested HIV-positive, he said.

### **Northern Province Reports 3,429 Test HIV Positive**

*BK0904021391 Bangkok BANGKOK POST in English  
9 Apr 91 p 3*

[Text] Chiang Rai—More than 3,000 people tested for the AIDS virus here have been found HIV positive. More than a third are prostitutes.

Public Health Ministry permanent secretary Uthai Sutsuk said yesterday the number of HIV positive victims had gone up to 3,429 with 1,842 being prostitutes, 599 farmers and 362 having other jobs.

More prostitutes have become HIV carriers and only 30 percent of their customers used condoms. Teenagers and labourers rarely use condoms, Dr. Uthai said.

The number of HIV victims in the northern province has risen by 100 to 200 per month, he said.

The permanent secretary told local people to stop selling sex.

Men were urged to use condoms.

### Chiang Rai Province Faces AIDS Problem

*OW1004141791 Beijing XINHUA in English  
0740 GMT 10 Apr 91*

[Text] Bangkok, April 10 (XINHUA)—AIDS (acquired immune deficiency syndrome) is the most serious health problem affecting Chiang Rai, a northern province in Thailand, with 100-200 people being infected by the disease each month.

According to a report of the Chiang Rai Public Health Bureau, 3,429 people in the province, including 1,842 prostitutes, 599 farmers and 362 laborers, have been found to be infected by the deadly disease.

Chiang Rai is one of 10 provinces in Thailand recording such high figures of AIDS infection. The report said the farmers and laborers who frequent prostitutes and do not use condoms are the main cause for the spread of AIDS. Their wives and children would in turn get infected by the disease.

According to latest figures given by the Thai Communicable Disease Control Department, there were 311 confirmed cases of AIDS in the country, 99 of whom had already died. It is estimated that Thailand may have as many as 28,000 carriers of AIDS virus by last month.

### AIDS Spreading in Prisons

*BK1204054791 Bangkok BANGKOK POST in English  
12 Apr 91 p 3*

[Text] Deputy Interior Minister ACM [Air Chief Marshal] Anan Kalintha yesterday expressed concern over a report by the Corrections Department that so far 2,527 inmates in prisons nationwide have been found to be AIDS carriers.

He said there must be measures to prevent and control the spread of AIDS in prisons.

Prisoners carrying AIDS must be separated from others and the inmates must be educated on AIDS prevention and control, ACM Anan said.

ACM Anan, who made an inspection trip to Klong Prem Prison at Lat Yao yesterday, also received a report that a 500-bed hospital for AIDS-infected prisoners is being built at the prison.

He said he had ordered the Corrections Department to consider moving prisons which are situated in towns to new locations outside towns.

### Government Adopts New Tactics in AIDS War

*BK2004043291 Bangkok BANGKOK POST in English  
20 Apr 91 p 1*

[Text] The Government yesterday pledged to combat the spread of AIDS through education campaigns rather than legal measures, suggesting that two strategies—a draconian draft bill and a ban on foreign AIDS carriers' entry—might be dropped.

The Government is to launch a national anti-AIDS programme focusing on AIDS education which will involve cooperation from all sectors, said Prime Minister's Office Minister Michai Wirawathaya.

Mr. Michai said legislation might not be the most effective means to fight the AIDS virus, which is believed to have infected between 200,000 and 300,000 people in Thailand.

The minister yesterday chaired a panel discussion where legal experts from the World Health Organisation were invited to give opinions on how to improve an AIDS bill.

Also at the meeting were foreign envoys, senior public health officials, experts, and AIDS activists.

Speaking to reporters after the meeting, Mr. Michai said the participants shared the view that there was no need for the Government to legislate to specifically cope with the spread of AIDS.

The problem, he said, could be effectively tackled by existing laws and measures if they were seriously enforced.

The controversial draft law has been under attack from AIDS activists who charged that many of its provisions would violate basic rights and lead to discrimination against AIDS victims.

Under the bill, for instance, authorities are empowered to conduct blood tests on any prostitutes, prohibit those who test positive from working, and confine them to rehabilitation centres.

Assoc. Prof. Withit Muntaphon said the draft law would force AIDS carriers to go underground, making it even more difficult for authorities to check the epidemic.

He said there were currently three laws dealing with prostitution but they were not seriously enforced by authorities.

At one point in the meeting a foreign envoy said he doubted if the passing of an AIDS law would be of any use in a country which, despite all existing laws, had failed to suppress prostitution.

Mr. Michai, who has been an outspoken anti-AIDS activist, said the meeting agreed that if any legislation is needed, it would be of a type which would give legal

protection to women, children, and employees infected with AIDS against discrimination on jobs and social services.

The minister said a national campaign would be launched to educate students in high schools and universities on AIDS. The programme would aim to effect changes in attitude among Thai teenagers about prostitution which has been mainly responsible for the spread of the virus.

The campaign would also target government employees in all ministries and state enterprises and involve the private sector, he said.

Mr Michai said state television would be instructed to devote one minute of every hour of airtime to anti-AIDS messages.

The campaign, he said, would aim to get across two types of information to the public. One is basic facts about AIDS; the other is to foster understanding and compassion for AIDS victims.

Meanwhile, Communicable Disease Control Department Director-General Thira Ramasut said the Public Health Ministry had already requested the Interior Ministry to lift its ban on foreign AIDS victims from entering the country.

WHO withdrew its delegation from an international conference on AIDS in Bangkok last December in protest at the ban.

Dr. Thira said the request for the ban to be revoked was made to the Interior Ministry on March 25.

Mr. Michai said the measure had proved ineffective in countries which had imposed similar bans to prevent local people from contracting AIDS.

Dr. Thira said the ministry would submit to the Cabinet a proposal for setting up a new national coordinating committee on AIDS prevention to be chaired by the Prime Minister.

#### **AIDS 'Increasingly Serious' in Chiang Mai Area** *BK2704045591 Bangkok THE NATION in English 27 Apr 91 p A4*

[Text] Chiang Mai—AIDS has killed three people in this northern province and infected more than 4,000 others, including about 1,700 prostitutes, a senior health official said yesterday.

Chiang Mai public health chief Anan Lapsomthop blamed the "increasingly serious" situation on the sex industry in the province, where there were more than 200 sex-related entertainment businesses.

Anan said 10 people had developed full-blown AIDS, while 4,283 people were found in a survey taken earlier this month to be carriers.

Most of the infected people were men aged between 18 and 50, Anan said.

Sixty-five percent of the AIDS carriers were infected through sexual intercourse, while 12 percent were intravenous drug users. The remainder were babies who had contracted AIDS through their mothers or were people who had caught the disease from unknown causes.

Prostitutes made up 40 percent of the infected people, followed by workers (21 percent), farmers (10 percent), soldiers and policemen (4 percent) and government officials (1 percent).

"I'm worried about the high rate of infection among farmers," Anan said.

"This group of people will allow AIDS to spread in rural areas."

Anan said many prostitutes in Chiang Mai were young hilltribe people or had been lured from neighbouring countries. Those girls were poorly educated and were not aware of the danger of AIDS, according to the doctor.

"A factor encouraging the AIDS spread here is the very low education of those prostitutes and their total lack of awareness to protect themselves," Anan said.

AIDS carriers had been found in all 20 Chiang Mai districts. Ten districts had more than 100 carriers each.

There was "limited success" in authorities' efforts to educate prostitutes, Anan said. Some prostitutes would not have sex with customers who refused to use condoms.

"But the sex industry is large. What we need is full cooperation from all parties concerned," Anan said.

## **VIETNAM**

#### **AIDS Prevention Measures Carried Out**

*BK3103093691 Hanoi International Service in English  
1000 GMT 29 Mar 91*

[Text] The Vietnamese National AIDS Committee just mapped out a medium term plan of AIDS prevention from 1991 to 1993 and it initially carried out this plan. It is reported that an international seminar on AIDS prevention in Vietnam was held on March 26 and 27 by the National AIDS Committee, the Health Ministry and the World Health Organization.

Over the past years with technical and financial assistance from the World Health Organization, the Vietnam National AIDS Committee has closely coordinated with ministries and social organizations in polarizing AIDS prevention measures and has achieved initial results.

**Meeting in Support of AIDS Plan Held in Hanoi**

*BK3003151091 Hanoi VNA in English 1454 GMT  
30 Mar 91*

[Text] Hanoi VNA March 30—A resource mobilization meeting in support of the AIDS medium-term plan of Vietnam has been held here.

This meeting was participated by the Vietnam national AIDS committee, representatives of the World Health Organization, the United Nations Development Programme, the United Nations Fund for Population Activities, the World Vision International, the United Nations Children's Fund, and representatives of some foreign embassies here.

The participants were informed of the latest information about AIDS in Vietnam and in the world. They agreed on necessary measures to prevent the disease, especially since the first HIV seropositive has been found in Vietnam. Speaking at the meeting several foreign delegates pledged to cooperate with Vietnam and help it with experience, scientific information and funds to prevent the disease.

With financial aid from WHO, the 1991-1993 medium-term plan include major orientations and specific measures to prevent and control HIV seropositive and help AIDS patients.



## BULGARIA

### New Medicine Claims To Be Cure For AIDS

AU0404183591 Sofia BTA in English 1806 GMT  
4 Apr 91

["Cure For AIDS"—BTA headline]

[Text] Sofia, April 4 (BTA)—Tias is a new Bulgarian medicine which, according to its inventors, could prove an efficient remedy for AIDS. The inventors have sent a strain to a world famous laboratory (which they decline to identify) to test Tias. The inventors: two veterinary surgeons, a pharmacologist and a chemist, who have been working on their invention for 20 years, hope that the new medicine will prove a major advance in medicine.

Mr. Mikhail Budorov, head of the team, told a press conference today that Tias kills the viruses causing ten other human and animal diseases. The inventors said they used methods and equipment which were foolproof against negligent application. Mr. Budorov said the medicine had no side effects. No residue of it has been found in the meat and milk of the treated animals.

Asked by the BTA to elaborate on the remedy, Mr. Budorov said: "It is a tricky thing which no one has thought of so far. I am optimistic about its efficacy against AIDS."

## POLAND

### Number of AIDS Cases Increases

LD2604082491 Warsaw PAP in English 0803 GMT  
25 Apr 91

[Text] Warsaw, April 25—Three Poles, including two women and one man, fell ill with AIDS last February and another three cases of developing AIDS were reported last March. Out of the six ill persons, five were drug addicts and one got infected with AIDS by heterosexual contacts, RZECZPOSPOLITA reported.

All in all, fifty-seven people have contracted AIDS and thirty-three have died in Poland, according to official data.

## ROMANIA

### Official Discusses AIDS Situation

91BA0377A Bucharest ROMANIA LIBERA  
in Romanian 28 Feb 91 p 5

[Interview with Dr. Ionel Victor Patrascu, chairman of the AIDS Association in Romania, by Petre Mihai Bacanu; place and date not given: "AIDS—Belated Recognition and Current Inertia"]

[Text] AIDS has become one of the major health problems in our country because of the authorities' indifference especially during the Ceausescu period. WHO experts who visited in 1990 pointed out that the current situation concerning the AIDS evolution in Romania (as much as we knew of it at that time) was similar to that observed in other countries that did not recognize and declare the disease early enough. We bring you a dialogue on this topic with Dr. Ionel Victor Patrascu, chairman of the AIDS Association in Romania.

**Bacanu:** Please begin by bringing us up to date concerning the most recent aspects of the disease.

**Dr. Patrascu:** All the experts in this area who contacted us had some reservations about the figures obtained in 1989-90, which they viewed as too low; they suspected that behind the figures indicating an unparalleled frequency of the disease among children in our country, there must certainly have been additional HIV-infected or ill persons, especially among the adult population. Experts often state that this is only the tip of an iceberg whose form and size we do not know. Before too long, by the end of 1990, we recorded increasingly more frequent cases of persons who tested HIV positive or suffered with AIDS. Infected persons were detected among blood donors, mothers of HIV-positive children, prostitutes, etc.

**Bacanu:** Is AIDS one of the special problems of 1990?

**Dr. Patrascu:** No. The spread of the disease in Romania cannot be correctly assessed as long as we do not have systematic and extensive studies apt to provide the elements required to understand this AIDS episode. We cannot extrapolate figures or observations from the study of AIDS hotbeds in other countries. We must work intensively, gather our own experience, and intervene in direct relationship with the situation prevailing in this unique center of disease known so far in the world. We are only now discovering what we should have known already in 1988. We are now timidly attempting to organize what could have been organized two years ago. The hotbed of disease was discovered in June 1989; the specialists in the area are members of the AIDS Association in Romania who for a time worked illegally under the Ceausescu dictatorship, because we were forbidden either to recognize the situation or to continue studying it. No official approval was received for such studies, all the proposals made in 1988-89 were rejected, no documentation was followed through, but neither was any official response received. In fact, the same method continues now, too. During the period between December 1989-September 1990 proposals were submitted to organize research and diagnostic activities in cooperation with foreign experts as a nongovernmental activity; the campaign was turned down without any related document.

**Bacanu:** There seem to exist many aspects which indicate that we are still not prepared to carry out nongovernmental actions in the area of public health care. There is

confusion between nongovernmental and private actions, which are treated with frank indifference...

**Dr. Patrascu:** While in our country such actions run into serious professional, administrative, and financial difficulties, in all the civilized countries a good percentage of the medical and social actions are carried out by nongovernmental institutions that enjoy every consideration. I had opportunities to become familiar with such situations in England, France, Germany, Switzerland, and the United States. Many of those institutions are not partly supported by the government at a national and international level, so that in those countries one does not find situations like the one in our country, where in the matter of nongovernmental actions official state persons are accepted in relations with foreign organizations [as published]. For that reason we encountered difficulties in organizing cooperation with similar foreign institutions.

**Bacanu:** Who do you think was interested in not revealing the AIDS situation in our country?

**Dr. Patrascu:** I think this is the time to recall the efforts made under the Ceausescu dictatorship by several persons at the Health Ministry, by some specialists involved in the national AIDS program coordinated by the Securitate in order to disinform the public and the international bodies and to curtail the teams of experts who had the potential to work in that professional area. The National AIDS Commission was as good as nonexistent; it was reorganized according to interests or "needs," but the medical personnel knew almost nothing about the real AIDS situation in Romania. The 13 September 1989 meeting of the National AIDS Commission, which I also attended, will remain as a negative example; the commission practically decided not to treat the children in our country, not to intervene at the "chancellery" to make the situation public, and refused to use the term AIDS, whereas the disease was to be disguised as "contagious hepatitis." That meeting was typical of the manner in which we, the specialists, did our job.

**Bacanu:** When did the world first become aware of the situation in our country?

**Dr. Patrascu:** A relatively small group of experts assumed the risk of informing the WHO, of presenting and demonstrating the actual situation prevailing in Romania, while the Ministry of Health totally opposed it, even after 22 December 1989. That program, whose purpose was to inform the WHO and international public opinion, began already on 1 December 1989 with unsuccessful attempts to send reports by telex. I think that the fact that the first telex went through on 22 December 1989 at 0800 was solely due to the events that were occurring in the Palace Square and to the fact that the Securitate lost control of the telex traffic.

**Bacanu:** What did the Romanian medical institutions do?

**Dr. Patrascu:** We received no material or moral support from either the Health Ministry or the Academy of Medical Sciences. No foreign currency funds were allocated for such research in 1990 either, so we organized cooperation actions with French, English, and U.S. specialists. Had we not received assistance from abroad and had we not continued the activities organized already in 1988, no progress would have been made in this respect and we would not have learned the truth. Along this line I want to take this opportunity to express thanks to the people of Medicine du Monde [MDM] and especially to its chairman Mr. Jacques Lebars, as well as to Mr. Jan Gabriel Barben, the coordinator of the MDM program for Romania. During 1989 cadres were trained with the cooperation of our specialists and are now working in this area; a program began to test children in orphanages, etc. We are forced to regretfully note that not too much has changed in the "working style and methods" of Health Ministry officials. The figures currently in circulation (even in the press) have not been updated since August 1990; we no longer know what the real situation in the country is, and the medical personnel is completely misinformed. Ever more frequently we hear about initiatives taken by foreign charity organizations and international organizations, but we hear very little or nothing about actions by the Health Ministry. Why are innocent children allowed to continue to be infected without anything being done about it? Just like in the past, specialists are not invited to help and there is no cooperation in this area. In 1990 I attended one of the few meetings held by the AIDS Commission and found out that "the right hand did not know what the left was doing," which was the method used not so long ago under the Ceausescu dictatorship. Concretely, we don't have a program to unite and coordinate the efforts of all those who can contribute, in one form or another, to preventing and fighting AIDS in Romania.

**Bacanu:** Why are such activities not organized and assisted under direct WHO oversight as is the case in other countries?

**Dr. Patrascu:** Up to now there has not been one meeting between the Ministry of Health and the nongovernmental institutions active in Romania. Up to now the National AIDS Commission has not organized any action in cooperation with the nongovernmental institutions active in this area.

And now a piece of good news. Two telephone lines have been installed at the AIDS Association offices (135 Calea Victoriei)—50 40 82 and 59 77 91—at which people can anonymously obtain information about AIDS.

### Over 1,000 Registered AIDS Cases in Romania

*AU2003142691 Bucharest ROMPRES in English  
1253 GMT 20 Mar 91*

[Text] Bucharest, ROMPRES—Romania has at the moment 1,055 declared AIDS cases and another 2,000-4,000 seropositive persons. Out of the 1,055 cases 983 are children under the age of 4.

The discovery of such unprecedented AIDS epidemics among children, Mrs. Barbara Geary, representative of the Red Cross League of Geneva, said, caused us to work out an AIDS information programme, to be carried out by the League in collaboration with the Romanian Red Cross. Files containing basic information on AIDS have already been distributed to the 41 counties of Romania.

The disease was not passed down from mother to child, it was spread chiefly by repeated use of infected syringes. According to Mr. Patrick Couteau, former League delegate to Romania, "that problem is still not solved in Romania: the available quantity of syringes is insufficient and imports inadequate."

The Red Cross League of Geneva organized 3 training units in Bucharest, Bacau and Tirgu Mures for nurses and personnel who come daily in touch with AIDS-infected patients. For the future, the Red Cross League of Geneva envisages, in collaboration with the Romanian Ministry of Health, a programme meant to increase the awareness and improve the knowledge of medical students about the AIDS phenomenon.

## YUGOSLAVIA

### Assembly Briefed on AIDS Cases

*AU2904114891 Belgrade BORBA in Serbo-Croatian  
20-21 Apr 91 p 4*

[B.P. report: "There Are 187 AIDS Victims"]

[Excerpt] Belgrade—Since 1985, when our country started to keep records of those who fell ill with AIDS, 187 people have contracted the disease. Out of these, 109 have died. This was stated by Dr. Branko Pocek, director of the Federal Institute for Medical Protection, addressing members of the Committee for Labor, Health, and Social Welfare of the Federal Chamber of the SFRY Assembly.

The bulk of those suffering with AIDS are drug users, 38.4 percent. They are followed by homosexuals and bisexuals, 21.2 percent, hemophiliacs, 16 percent, and heterosexuals, 12 percent. There is only a negligible number of those belonging to other categories. Out of the total number of those suffering with AIDS, 87 percent are men and 13 percent are women. [passage omitted]

**ARGENTINA****AIDS Cases Expected To Rise**

*PY2204223791 Buenos Aires NOTICIAS  
ARGENTINAS in Spanish 2059 GMT 20 Apr 91*

[Summary] The number of reported cases of AIDS since 1985 totals 205.

According to a report from the Health Ministry of the Buenos Aires province, this number is expected to rise to 565 this year and to 1235 in 1992.

The method of contagion by percentage, in decreasing order, is drug consumption (50 percent), sexual contact (35 percent), blood transfusions (7 percent), and congenital exposure (5 percent) [figures as received]. The ratio of occurrence of the disease, woman to man, is one to seven.

**BRAZIL****AIDS Spreading Among Rio Drug Addicts**

*91WE0292B Rio de Janeiro O GLOBO in Portuguese  
17 Mar 91 p 37*

[Report by Helio Hara]

[Text] A study done by UERJ [State University of Rio de Janeiro] on AIDS and intravenous drugs indicates that the AIDS virus is spreading among addicts in Rio and reveals some surprising data about that group. Almost half (42 percent) of the addicts examined by UERJ's Studies and Research Unit on the Use of Drugs (NEPAD) now carry the HIV virus. NEPAD researcher Elson Lima says that the results would tend to be identical as regards the city's total addict population. In the United States, however—except for New York—the average is 20 percent.

"During the interviews, most of the addicts described themselves as careless. They know how the disease is transmitted, but are not giving up drugs. This shows how difficult it is to change behavior," said Lima.

NEPAD's work revealed a circumstance not commonly found in other countries: among the infected individuals whose data have already been tabulated, more than half—66.6 percent—are homosexual or bisexual males. That suggests that in the case of this chain, gays and bisexuals serve as "warehouses" for the virus. They presumably become infected through sexual relations and, even if they change their habits (using condoms, for example), would continue to spread HIV through contaminated needles.

NEPAD interviewed 97 addicts—81 percent of them men—last year and 47 more this year; 48 underwent blood tests. Their average age was 28.3 years and they had been using intravenous drugs for an average of 11.5

years. Cocaine is injected by 80 percent of the addicts. Forty percent of the respondents were hospitalized for treatment in clinics.

The percentage of heterosexual men among the addicts who had been examined by the end of last year was 25 percent. Only one woman was an HIV carrier.

**Lack of Funds Threatens Research**

NEPAD's work is part of a study being conducted simultaneously in 12 cities worldwide to collect data on AIDS and intravenous drugs. Unfortunately, says researcher Elson Lima, the project may have to be suspended this month for lack of funds. Of the \$66,000 (15.18 million cruzeiros) received from the World Health Organization, \$10,000 (2.3 million cruzeiros) were blocked under the Collor Plan. The rest has already been spent.

Each research center is supposed to collect data on 450 addicts (some of them at treatment clinics). They answer a standard questionnaire and, if they consent, are given tests to detect the virus.

It is estimated that as many as 3,000 people in the city of Rio de Janeiro are addicted to intravenous drugs. In New York, there are more than 300,000.

**CHILE****Significant Increase in AIDS Cases Projected**

*91WE0264A Santiago EL MERCURIO in Spanish  
25 Feb 91 p A-2*

[Commentary by Dr. Juan Bernal, President, National Foundation Against AIDS]

[Excerpts] The disease of AIDS, which we normally know through statistics, is actually the second epidemic, the epidemic of AIDS patients. Before this there was the epidemic of healthy carriers. The third epidemic will come with the consequences resulting from the death of a large group of young adults. From an epidemiological viewpoint, only by stopping the first epidemic will we be able to control AIDS in Chile. In exponential growth models, when the rate of increase equals one unit, we have the best known rate of increase which is geometric progression. This is equivalent to an annual doubling of AIDS cases. AIDS in Chile has grown at a rate of 1.08, more than doubling AIDS cases each year. Moreover, despite 10 years of education in the United States, the curves continue to rise there; so in the short term, education does not help to halt the epidemic. [passage omitted]

The behavior of the AIDS epidemic in Chile between 1984 and 1989 demonstrates our precise situation;

without effective measures, the extrapolation of this situation will produce chaotic figures by the year 2000. The short term projections (six to 10 years) are irrefutable and cannot be denied, based on current analyses, and we must prepare ourselves for this. For the end of 1990, the projections were for 470 patients. The health authorities confirmed this figure in December 1990. For the medium- and long-term periods, the figures will depend on changing the sexual behavior of the Chilean people. To date, statistics do not reflect that such a change has taken place in the developed countries. Nor has the exponential growth rate of AIDS diminished in these countries. A change in behavior did occur among homosexuals, but only when the majority of the group had been infected. At some point in Chile, the figures will begin to decline, due to the high number of patients, groups which become monogamous, infected persons who become aware of the problem, etc. If we assume, rather optimistically, a change in behavior that becomes evident by 1995, and from that year on the number of patients decreases exponentially, we still reach the year 2000 with almost 300,000 AIDS patients. The long-term projections may be debatable, but in the short-term these projections are inescapable. By 1994, when people who are now infected become ill, there will be about 9,266 patients. This is a rate of 70 cases per 100,000 inhabitants, a figure similar to the current rate in the United States. This will mean a cost of \$100 million for Chile. The cost of stopping the epidemic is close to \$50 million, and Chile has the resources to do this. This exponential growth has outstripped all the educational campaigns in the world, and that is why it is urgent to take comprehensive steps to halt the epidemic faster than its rate of propagation.

The invisibility of the first epidemic, the exponential growth rate, the slowness of educational measures, the slowness of any effective remedy, the failure to stop the epidemic in countries that have had the problem far longer than we have in Chile, and Cuba's experience, which has eradicated AIDS from the island, all lead us to the conclusion that the only way to stop the epidemic is for the great majority of the people with AIDS to learn that they are carriers, to take care of themselves, and to avoid infecting the general population. To do this, we must make the first epidemic visible, and therefore perform AIDS tests (blood tests) of the sexually active population, not in order to isolate or discriminate against carriers, but rather to give them medical and spiritual support, to delay the onset of the disease, and to have the group identified prior to the development of medications. After a month, they could freely and anonymously rejoin society, along with an intensive and repeated information and educational campaign and appropriate laws to protect society and the people infected. Trying to change sexual behavior in the short-term in the entire Chilean population is a utopia; it is easier and more feasible to educate a highly motivated group, like healthy carriers. The final solution for this problem is political, and the state must play its part as soon as possible. [passage omitted]

## EL SALVADOR

### Health Ministry Reports on Growing Number of AIDS Cases

PA1304155091 San Salvador Canal Doce Television  
in Spanish 0300 GMT 4 Apr 91

[Passages within quotation marks are recorded]

[Text] Health authorities have discovered 31 new cases of AIDS during the last 12 months, thus bringing the number of infected people in our country to 357. Doctor Romulo Vides, member of the Health Ministry's Epidemiology Department, said that El Salvador now has one of the highest rates of AIDS cases in Latin America. Dr. Vides: "Brazil is in the lead in Latin America, followed by Mexico. Honduras has the largest number of cases of AIDS in Central America, but we cannot fail to admit that it is a serious public health problem in El Salvador. It is really a challenge to the public health system, and we must face the challenge."

El Salvador is slowly becoming a country with one of the highest number of AIDS cases in Latin America. A total of 357 AIDS cases have been detected so far, and 63 of them have already died. The Health Ministry is truly concerned about this problem.

Dr. Vides: "The WHO has calculated that between 50 and 100 persons carry the virus for every case that is diagnosed."

This means that 3,570 Salvadorans could already be sick with AIDS, and this number will continue to increase unless the campaign currently being waged against the disease proves successful. The campaign encourages the use of condoms, among other things. The first cases in El Salvador were detected among citizens who had returned from the United States, but the myth no longer exists.

Dr. Vides: "We began to detect our own cases shortly afterwards. We have information about 171 persons who did not travel abroad and have been diagnosed as carriers of the AIDS virus. Due to the conflict, a large number of persons move from one part of the country to another, aside from those who travel abroad, and the AIDS virus is quickly circulating throughout the country."

Dr. Vides also said that the AIDS virus has spread throughout the country's urban zones, particularly in the eastern and western zones, where the authorities have detected AIDS carriers—most of them men—whose ages range between 15 and 34 years.

## GUATEMALA

### Increase in AIDS Cases Termed 'Alarming'

PA2504213391 Guatemala City SIGLO VEINTIUNO  
in Spanish 15 Apr 91 p 3

[Excerpt] As of February 1991, Guatemala has experienced an alarming increase in the rate of AIDS infection

and deaths: 165 patients were recorded and there have been a total of 80 deaths, according to a report by the Ministry of Public Health and the Pan American Health Organization [PAHO].

The 28 February 1991 PAHO report states that among the AIDS infected patients there are 50 homosexuals, 67 heterosexuals, 25 bisexuals, three drug addicts, two prostitutes, and two hemophiliacs. In addition, three persons were infected due to drug addiction and homosexuality, 10 due to blood transfusions, and three due to unknown causes. [passage omitted]

## MEXICO

### Increase in Number of AIDS Cases

*PA2003033691 Mexico City NOTIMEX in Spanish  
1852 GMT 11 Mar 91*

[Text] Mexico City, 11 Mar (NOTIMEX)—With an increase of close to 2,500, or 40.1 percent, in the number of reported AIDS cases in 1990, Mexico ranks third on the American continent and 11th throughout the world.

According to the most recent figures of the Secretariat for Health and Public Assistance's [SSA] Center for Exchange, Documentation, and Information on AIDS [CIDIS], 6.6 new cases occurred daily in 1990, 42.3 percent of which were reported to this agency.

According to the report, the greatest number of AIDS cases occur in the largest urban areas, such as Mexico City, with 2,000, Jalisco, with 800, and the state of Mexico, with 780.

CIDIS also said that in Mexico one out of every 2,730 males between 25 and 44 years of age has either been infected or killed by AIDS. In addition, AIDS has been diagnosed on and reported to one out of every 5,684 males between 45 and 64 years of age, and one out of every 12,725 males between 15 and 24 years of age.

The agency reported that in the cases associated with heterosexual transmission, the trend is upward, although the information presented in the 1990 bulletin indicates a high proportion of cases reported as heterosexual transmission in males, a situation that suggests these men are really homosexual or bisexual.

Finally, regarding the present condition of the patients, the report said that 44.4 percent are still alive and 49.6 percent have died. The report did not give any follow-up figures for 5.9 percent of the patients.

## ST. LUCIA

### Health Ministry AIDS Committee Emphasizes Education

*FL1804194591 Bridgetown CANA in English  
1708 GMT 18 Apr 91*

[Article by Peter Richards]

[Excerpts] Castries, St. Lucia, April 18, CANA—St. Lucia's health officials agree condoms are one of the best means of preventing the spread of the deadly Acquired Immune Deficiency Syndrome (AIDS). But there is a problem as to how best to advertise its use.

The Health Ministry's AIDS Action Committee, emphasizing higher levels of preventive education and stronger emphasis on patient counselling as a means of combating the disease, has been told that a radio advertisement urging greater use of condoms is not fit to be aired. [passage omitted] Acting general manager of the state-owned radio St. Lucia Ernie Seon told CANA [CARIBBEAN NEWS AGENCY] that the advertisement in French Creole contained words not fit for air play. [passage omitted]

Joseph Medar, acting director of the Bureau of Health Education said that the advertisement would have the desired effect since most people "do not feel free to talk about sex—and condoms." [passage omitted]

Valerie Albert, a senior executive at Helen Television Service (HTS), whose advice had been sought by the AIDS Action Committee said she found nothing wrong with the advertisement. "AIDS is a serious issue. Here is an ad which you can get humour from but it has a serious message," she said. [passage omitted]

Radio call-in programmes carry lively debate on the issue. But health officials are more worried about the fact that since 1985 when the first AIDS case was diagnosed here, 56 people have tested positive for the virus which causes AIDS and almost half of them have died.

Medar said the main constraint facing the committee is that most St. Lucians, though aware of how the disease is spread are not changing their behaviour.

"Youths in this country seem to think they are not at risks to AIDS," he said pointing out that the majority of cases fall within the 20-44 age group. A survey conducted by the Bureau of Health Education among 600 people in the age group 15-60 years found that while most were aware of the disease, they were reluctant to discuss the use of condoms. [passage omitted]

## BANGLADESH

### Seminar Told No AIDS Cases in Country

91WD0603 Dhaka *THE NEW NATION* in English  
19 Feb 91 pp 1, 8

[Text] Prof. Zillur Rahman Siddiqi, Presidential Adviser for Education, has called for creating mass awareness against AIDS and said mass media could play a vital role in this regard, says BSS.

The Adviser was inaugurating a three-day seminar at the Nipson auditorium in the city on Sunday which was jointly organised by the Bureau of Health Education and National AIDS Committee.

Presided over by Prof. M.A.T. Siddiqi, Director General of Health, the inaugural function was also addressed by Prof. K.M. Fariduddin, Additional Secretary of the Ministry of Health and Family Welfare, Dr. A.M.A. Abesunderi, Representative of the WHO and Mr. Gfas Kamal Chowdhury, a journalist. Prof. Siddiqi said the Government had taken proper steps to check AIDS in the country and added so far blood samples of 42,000 people had been tested and no AIDS virus was found.

He said nearly 700,000 people of 158 countries of the world were infected by AIDS and 100,000,000 more people were expected to contract this deadly disease in the next few years. "Prevention of AIDS in Bangladesh should be handled with priority as majority of the people are suffering from various diseases and malnutrition," he told the seminar.

Fifty representatives from different mass-media including Press Information Department (PID), Bangladesh Sangbad Sangstha (BSS) and Bangladesh Television are taking part in the seminar.

## INDIA

### AIDS Said To Create Panic in Manipur

91WD0557 Calcutta *THE STATESMAN* in English  
14 Feb 91 p 12

[Article by Gautam Chaudhuri]

[Text] Imphal, 13 Feb—AIDS has created panic among the people of Manipur, the "jewel of India" where hapless youth, both educated and uneducated are falling easy prey to this lethal disease, while a listless State administration is content watching the tragedy with seeming indifference. The death toll till mid-January was officially six, but the enormity of the problem cannot be gauged by mere statistics.

Over 1,000 persons, mostly young men, are said to have been found Human Immuno Virus (HIV) sero-positive, confirmed by the Western Blot test. About 97 percent of them are between 15 and 35 years of age. "The situation is worsening every day. A major part of the new generation will be wiped out by this killer disease, unless

serious efforts are made immediately to contain the spread of AIDS," experts said.

"The situation here will soon be akin to Africa, where AIDS has wasted millions of lives, especially that of children," according to the experts. They point out that most of those found HIV sero-positive cannot be traced easily since they are spread far and wide in the valley and the hills. "Not all of them will be full-blown cases, but a sizable part may have the capacity to transmit the disease knowingly or unknowingly to a vast number of people," the experts said.

They wonder why the government is taking an ostrich-like attitude in the face of this impending catastrophe. They feel that all the HIV sero-positive cases should have been segregated from the people, put in a sort of quarantine, with the health officials monitoring their day-to-day conditions. "This step would have ensured proper treatment of the affected people and could have checked the rampant spread of the disease. They need to be closely watched all the time because many of them may be potential carriers of AIDS."

The Chief Minister R.K. Ranbir Singh, is aware of the problem but pleads helplessness because of lack of funds and sufficient man-power. "The State has no resources and we are heavily dependent on the Centre. Unless the Centre helps we cannot do much in this regard," he said. He also points out that he has "inherited the budget of the previous Congress(I) Government, the coalition Government having come to power after the budget for this financial year was passed in the House." In the coming budget, he said at least Rs 1 crore would be kept apart for combatting AIDS.

Surprisingly, though AIDS is raging in Manipur for some years, the previous Government, which framed the budget for 1990-91 had not earmarked a single paisa for tackling the disease. "I am just scraping as much as I can by transferring funds from other projects to dealing with AIDS. We sought Rs 76 lakhs from the Centre for making arrangements for the AIDS programme, but received only Rs 20 lakhs. It is a herculean task and without generous Central assistance, we cannot make much headway," Dr. P.K. Singh, Director of Health Services, said.

Not surprisingly, the State has not yet developed an infrastructure to handle the disease and its victims. The Director of Health Services talks of plans to set up special beds, well-equipped laboratories and other facilities, but the situation has come to such a pass that ad hoc measures will no longer suffice. "We need full-scale efforts, proper infrastructure and committed personnel immediately," the experts said.

The steps taken are not coordinated well and lack foresight, which have compounded the problems. Two surveillance centres have been set up in Imphal town and the proximity of these two centres has created a sort of rift among experts at the centres. "Why should there be

two centres at one place when there are places like Churachandpur with a large number of HIV positive cases."

Churachandpur is a congested border town of 25,000 people, barely 60 km from Imphal town, drug-trafficking is rampant. At least one person in each family is said to be a drug-addict. Since intravenous drug-users constitute the majority of the HIV sero-positive cases (about 95 percent), it is little wonder that AIDS is rampant here.

"It is a very hard place to bring up your children," according to the manager of a nationalized bank and a doctor at the local hospital, both recently transferred to Churachandpur.

By a conservative estimate, the State has about 30,000 drug addicts. The purest quality of heroin is available freely in Manipur, coming from the Golden Triangle of Laos, Thailand and Burma, the latter sharing a 352-km border with the State, most of it being heavily forested, with only seven outposts entrusted with the manning of the border. It was in 1982 when heroin first started arriving in Manipur. Now it has become the most popular route for the drug-traffickers to channelize the stuff to other countries. The purest heroin here is very cheap, a kg costing only Rs 1 lakh or so while it fetches at least Rs 1 crore in Western countries.

#### New AIDS Virus, More AIDS Cases Discovered

##### Bombay Virus Detected

91WD0637 Calcutta *THE TELEGRAPH* in English  
11 Mar 91 p 5

[Text] New Delhi, 10 March (PTI)—The AIDS situation in India has become worse with the discovery for the first time of another strain of the human immunodeficiency virus. The virus, HIV-2, has been detected in Indian patients by doctors in Bombay.

Until recently all 4,000-odd infections in India were caused by HIV-1. Doctors at the STD clinic of the G.T. Hospital in Bombay have reported that four out of 22 blood samples screened in January showed double reaction to both HIV-1 and HIV-2 while one sample from a 25-year-old pregnant prostitute was positive only for HIV-2.

Confirmation of antibodies to HIV-2 virus came from chemotherapy research in Frankfurt, Germany. Reporting their findings in the British journal *LANCET*, the Bombay doctors, Dr. J.K. Maniar and Dr. P.K. Rao, said more HIV-2 infections are probably present in India "than have so far been identified."

The report said HIV-2 probably existed for some time in India due to old connections between India and Africa, where HIV-2 was first discovered.

According to the Bombay doctors the "spread of HIV-2 in India is substantial." According to the report, doctors

in Madurai in Tamil Nadu have also recently detected HIV-2, although this was not yet confirmed by other tests.

The report said "Asia can no longer be considered free of HIV-2" and warned that blood products in India must be tested for both HIV-1 and HIV-2. The test kits currently imported by India can detect only HIV-1. With the appearance of HIV-2, India may henceforth have to import kits to screen both strains of HIV.

#### Cases in Haryana

91WD0637 New Delhi *PATRIOT* in English 16 Mar 91  
p 2

[Text] Chandigarh, 15 March (PTI)—Three AIDS cases had been detected in Haryana, the State Vidhan Sabha was informed during question hour here today.

In his written reply, State Health Minister O.P. Bhardwaj, said one AIDS case was detected at Panchkula and the concerned person was under regular treatment at the PGI here. Two foreign students had developed AIDS in 1988 and one was deported back while the other committed suicide in Karnal jail, he said.

#### IRAN

##### Minister Addresses AIDS, Pollution, Population Issues

LD3003122591 Tehran *IRNA* in English 1015 GMT  
30 Mar 91

[Text] Ganaveh, Bushehr Prov., March 30, IRNA—Minister of Health Reza Malekzadeh Saturday warned against spread of AIDS in the country. Malekzadeh who arrived in this southern province Friday afternoon said that passengers visiting Western countries have brought the disease into the country and called for educational programs to inform the public of ways of protecting themselves against it. Turning to dangers posed on the environment by air pollution in the Persian Gulf caused by the burning Kuwaiti oil wells, the minister appealed to the World Health Organization (WHO) to help control the pollution. On government measures to control population growth, he said that during the past Iranian year (ended March 20) some 70,000 women at child-bearing age were sterilized.

#### PAKISTAN

##### 'Source' Reports AIDS Patients Increasing

OW1204104291 Beijing *XINHUA* in English  
0830 GMT 12 Apr 91

[Text] Islamabad, April 12 (XINHUA)—Acquired immune deficiency syndrome (AIDS) patients are on the increase in Pakistan, official paper "THE PAKISTAN TIMES" quoted an informed source at the National Institute of Health as saying today.



The paper reported that of more than 100,000 persons tested up till March, 84 persons have been affected, 14 of them have fully blown AIDS while the remaining carry human immuno-deficiency virus (HIV) which can lead to AIDS.

The report said that in 1986 only four HIV positive cases were recorded in Pakistan, but in 1989 another 12 persons were infected with the deadly virus and seven others had full blown AIDS. In 1990 this trend continued and 29 cases of HIV positive and one case of AIDS was again reported.

In Pakistan, the major sources of the spread of AIDS are considered to be through blood transfusion, heterosexuality, sharing of syringes, overseas Pakistanis, mother-to-baby infection, foreign tourists and sailors.

There are now more than three million overseas Pakistanis, most of them live alone abroad, and there are

numerous blood donors in the country who cannot be scanned before transfusion, as it involves huge amounts of resources which Pakistan lacks.

Keeping in view the threat posed by AIDS, the government of Pakistan launched AIDS control program in 1988 with a fund of 20 million rupees (about one million U.S. dollars).

A national AIDS committee has been formed with full provincial representation. A short term plan to combat AIDS has been drawn up and 19 laboratories for blood scanning for HIV have been made operational in all the major cities. The government has started to issue AIDS free certificates to foreigners who wish to stay in the country for more than a year.

AIDS free certificates have also been declared necessary for imported blood products, and blood screening is done at airports and seaports.

**Delay Noted in Development of AIDS Epidemic**

*LD2203061991 Moscow TASS International Service  
in Russian 1827 GMT 21 Mar 91*

[Article by TASS correspondent Eleonora Sutotskaya]

[Excerpts] Moscow, 21 March (TASS)—“There are now 594 people in the USSR infected with the AIDS virus and 54 sufferers from this grave disease, 33 of whom have died. This was stated today at a session of the USSR Academy of Medical Sciences by its president, Valentin Pokrovskiy, who heads Soviet research in this field. Commenting on the figures, he said they are three times lower than predicted. “We seem to have succeeded in delaying the development of the epidemic somewhat, but there is no cause for complacency. This highly dangerous infection has been introduced into the country and is affecting more and more victims“. [passage omitted]

Pokrovskiy continued: “Every case of infection is being investigated, and this enables the source and the modes of transmission to be discovered. More than 1,000 diagnostic laboratories and 21 republican and regional centers are engaged in this work. There are 61 institutes studying the scientific problems of AIDS. Diagnostic tests and medicines are being developed and the virus and the ways in which it is transmitted are being studied. One of these—from infected infant to mother—has been described for the first time by Soviet scientists.”

**Anti-AIDS Program Expected Soon**

*LD2504130591 Moscow TAS in English 1029 GMT  
25 Apr 91*

[Text] Moscow April 25 TASS—An anti-AIDS state programme is expected to be adopted soon by the USSR Cabinet of Ministers, the “SOVETSKAYA ROSSIYA” daily reports today.

There are 619 HIV-positive and less than 60 full-blown AIDS patients in the Soviet Union today, but their number is expected to grow because of lack of medical equipment and preparations and due to “extensive tourism”. Experts say the Soviet Union will have 1,5 million HIV-positive people by the year 2000.

Allocations for the anti-AIDS fight will have to be doubled in the near future if the spread of the virus is not stopped. All republican health ministers, except the Georgian one, took part in the discussion of the anti-AIDS programme in the Soviet health ministry. The programme is to be financed from the union budget, which is not getting much from the republics.

Until recently it has been generally thought in the Soviet Union that there is no AIDS threat for people outside the “risk group”, the daily writes. But there are 21 children among those killed by the disease in the USSR, and there are other facts proving that not only drug addicts, homosexuals and prostitutes face the threat.

Today the Soviet Union has a system of early preventive measures. Thirty-three million analyses have been carried out, 90 million people underwent AIDS blood tests. With the opening of 110 anti-AIDS centres a massive attack on the virus begins. A new method of electrolysis, designed by Soviet specialists, will provide quick and safe sterilisation of medical equipment, the daily stresses.

## DENMARK

### New AIDS Ward in Fredriksberg Hospital

91WE0232B Copenhagen BERLINGSKE TIDENDE  
in Danish 21 Feb 91 p 2

[Report by RITZAUS BUREAU: "New AIDS Ward in Fredriksberg Hospital"]

[Text] AIDS patients in the municipality of Fredriksberg will no longer have to go to Hvidovre Hospital, the National Hospital, or Bispebjerg Hospital. Local elected officials have decided that Fredriksberg Hospital will be offering treatment to AIDS patients as well as HIV-positive individuals. The municipality of Fredriksberg contains the highest percentage of AIDS patients in Denmark. In 1990 Fredriksberg's AIDS patients used up 1,500 days in bed in Copenhagen Municipality hospitals. "We will force none of the patients against their will to be moved from another hospital to Fredriksberg. The changeover will be handled on a step-by-step basis," said Chairman of the Board Stig Hvidtfeld at Fredriksberg Hospital.

## FRANCE

### Rocard Reaffirms Support for AIDS Research

91WE0255A Paris LE MONDE in French 7 Mar 91  
p 12

[Text] On Tuesday, 5 March, Prime Minister Michel Rocard spoke at a ceremony marking the official opening of the new Pasteur Institute building to house research on AIDS and the retrovirus, stressing "that all credits allocated for AIDS will be continued" and should therefore not be affected by budget cuts made necessary by the war in the Gulf, reminding his listeners that between 1988 and 1989, this government "quadrupled budgets for prevention and tripled those earmarked for research," Rocard added: "It is up to us to pursue our effort and mobilize our energies for the fight against the plagues besieging mankind, including AIDS."

Furthermore, according to statistics published by the BULLETIN EPIDEMIOLOGIQUE HEBDOMADAIRE, the number of AIDS cases in France by 31 December 1990 was an estimated 14,762. According to health officials, "If one assumes underreporting of 10 to 20 percent of all declared cases, then the number of cases diagnosed since the beginning of the epidemic would be between 16,200 and 17,700."

Based on an analysis of the 13,145 cases counted (including 279 children and 1,945 women), men have been the most affected by the disease (5.8 men for every one woman). However, the proportion of women diagnosed in 1989 continues to rise (15.9 in 1989 compared with 16.4 in 1990). The average diagnostic age in women rose from 27 in 1985 to 34 in 1990. This "aging trend" has not been observed among men.

Such data show that since 1988, onset of the disease has been accompanied by frequency of the cachectic syndrome and, since 1985, cerebral toxoplasmosis. Other conditions associated with infection by the AIDS virus, such as Kaposi's sarcoma (since 1986) and herpes (since 1984), are declining.

The region hardest hit remains the Antilles-Guyana (699 cases per 1 million inhabitants), followed, in decreasing order, by Ile-de-France (659 per million), Provence-Alpes-Cote d'Azur (438), Aquitaine (186), Languedoc-Roussillon (166), and Midi-Pyrenees (143). Of the 13,145 cases, 766 resulted from transfusions and 173 are hemophiliacs.

### Imuthiol Approved for AIDS Patients

91WE0306A Paris LE MONDE in French 4 Apr 91  
p 13

[Article entitled: "Imuthiol To Be Issued on a 'Compassionate' Basis to AIDS Patients"—first paragraph is LE MONDE introduction]

[Text] The French Ministry of Health has decided to authorize the pharmaceutical company Pasteur-Merieux Serums and Vaccines to issue a new immunoprotective medication, disulfiram (Imuthiol), to AIDS patients.

This authorization, not to be construed as permission to market the drug, is a first in France in that it establishes a new category of medications, so-called "compassionate treatments."

According to the entourage of Mr. Bruno Durieux, deputy minister of health, the measure aims to "avoid depriving AIDS patients who do not respond to antiviral medications of a product that several studies suggest would have some effectiveness in treating their illness."

The announcement follows the publication last week, in the Journal of the American Medical Association, of a vast multicenter study conducted in the United States. The study apparently showed that Imuthiol is innocuous and can reduce the frequency of opportunistic illnesses in AIDS patients.

The first therapeutic trials with disulfiram began in France in 1983. Based on the encouraging results, the Food and Drug Administration authorized experimentation with the drug in the United States in 1985. Several studies subsequently demonstrated that the medication was able to slow the progress of the disease, apparently without triggering major side effects. The immunoprotective effects of the molecule seem to be due to its antioxidant power and its ability to trap free radicals involved in the viral infection.

Disulfiram was officially authorized for the first time in 1990, in New Zealand. In France, until authorization to market the drug is given, the Ministry of Health has thus decided to act somewhat along the same lines as his

American counterpart, by authorizing prescription of the medication to AIDS patients on certain conditions.

The conditions for issuing the drug—at no cost to the patient—are a failure to respond to antiviral medications (essentially AZT) and nonparticipatory status in experimental protocols.

The Ministry of Health describes the move as “plugging a legal gap” and “responding to the publication of scientific results.” The ministry further points out that disulfiram prescriptions will be written only in hospital centers, at the request of physicians specializing in AIDS. The Pasteur-Merieux Company says that an application to register the drug will be filed in all EC countries, as well as Austria and the Scandinavian countries, during the second half of 1991.

In the United States, another “compassionate” treatment—DDI, produced by the Bristol-Myers Squibb firm—should soon be authorized for sale. Thus, in the short term, American AIDS patients should be able to choose between two antiviral medications: AZT and DDI.

## GREECE

### ‘Alarming’ Increase of AIDS Carriers

91ES0252A Athens I KATHIMERINI in Greek  
21 Feb 91 p 6

[Text] Thessaloniki: “The frequency of identifying new AIDS carriers is increasing in Northern Greece at an alarming rate. Especially disturbing is the fact that we have an increase of carriers among women and among people outside the groups considered to be high risk.” This was stated to KATHIMERINI by Dr. I. Doutsos, professor at the Thessaloniki University Medical School who is in charge of the AIDS Report Center.

According to data gathered by the Ministry of Health, up to the end of 1990, 410 carriers were identified throughout the country and 200 of them were “defeated” by the virus. Professor Doutsos said that in the next few months the number of carriers will increase since it is expected that the disease will appear in those who were infected during the past five years.

In 1987-88, one new carrier was identified in Northern Greece each month. By the end of 1990 one new carrier was identified every 10 days. Today, in the AIDS Report Center, 20 to 40 individuals each week come to be tested. Out of that number there is usually one identified as a carrier.

According to Doutsos’ estimates, the chances for new infections are considerable because by the time the symptoms become evident the carriers may have transmitted it to other persons. Many of those carriers will do so unknowingly, as we find out later, because they are heterosexual with no homosexual contacts and they are not drug users.

## IRELAND

### Increase in AIDS Cases Continues

91WE0302A Dublin IRISH INDEPENDENT  
in English 22 Feb 91 p 3

[Text] New Department of Health figures reveal that 77 deaths have now been caused here by the AIDS virus—an increase of three in little more than a month.

The rising tally of cases emerges from new data showing that 186 full-blown cases of the disease have now been notified.

This confirms that four new cases have emerged in the period while it is now known that the total number of HIV positive patients is 1,000.

It is understood that of the 186 AIDS patients, 17 were haemophiliacs who contracted the disease from infected Factor 8 in blood transfusions.

And the Department’s figures are also understood to reveal that of the total tally of deaths from AIDS, 10 were haemophiliacs.

The figures have emerged as continuing delays mark the appointment of a new AIDS consultant and a hold-up in a planned walk-in treatment centre on Dublin’s north-side. Both moves are designed to take pressure off the existing Baggot Street Hospital facility.

Department sources indicated that the appointment of the consultant has been approved but has to be processed and filled according to regulations.

## PORTUGAL

### Detailed Statistics on AIDS Cases

91WE0300A Lisbon O DIABO in Portuguese 19 Mar 91  
p 4

[Text] In connection with a topic discussed in this section of our last edition by reader Elsa Roque of Lisbon, we have received from the Center for Epidemiological Surveillance of Communicable Diseases further supplementary data on the evolution of AIDS in Portugal up until 31 December 1990.

Because this is an issue of major social importance, we have decided to return to the subject. We take this opportunity to correct our reader: Professor Machado Caetano is not dean of the Order of Physicians; that position is held by Professor Machado Macedo—a natural confusion associated with the fact that their first names are the same.

But let us discuss the information and tables provided by the center.

**Evolution of the Disease**

At the beginning of the epidemic, the duplication time for new cases was one year, which occurred in Portugal until December 1988. During 1989 the reporting rate declined, and the time calculated for duplication of new cases was 16 months. In early 1990, the total number of patients reported with AIDS was 351. The 22 discovered during the course of 1990 represent a duplication time of 19 months.

If we note the number of cases by date of diagnosis, we find that every year there is a smaller number of persons diagnosed in comparison with those reported. Of course, this stems from the delay in reporting. Nevertheless, this difference is particularly obvious in 1990, a time when only 162 of the 222 reported were diagnosed during that year.

**Increase Among Women**

In the evolution by year of diagnosis and sex, one observes a proportional decline in the number of patients of the male sex from 1985, a year in which 26 cases (96.2 percent) were recorded, to 1989, when the 134 males accounted for 83.8 percent. In the female sex, the rise in numbers is irregular; however, an increase in reports occurred.

By age groups, we find that 71.2 percent of the patients belong to the 20-to-44-year age groups. This is considered to be "of particular concern" because these are individuals at the height of their productive activity. Among women, in view of the risk of vertical transmission, the consequences stemming from the affected age groups are even more distressing.

**The Risk Groups**

Male homosexuals and bisexuals constitute 15.9 percent of the reported cases. Heterosexuals represent the second risk group most often reported (27.2 percent), followed by the drug-addicted group, with 11.5 percent of the reported cases.

Nearly 50 percent of the patients afflicted with AIDS eventually die.

**Only Portalegre Without Deaths**

In the distribution of cases and deaths by district of residence, we find that 51.6 percent of the cases were detected in the Lisbon district; 48 percent of the deaths also occurred in that district. The other deaths were distributed among all districts of the continent and autonomous regions, with the exception of Portalegre, where no deaths were recorded.

A total of 41 reported cases pertains to citizens residing abroad when diagnosed with AIDS. Generally speaking, these are individuals who returned to Portugal in a condition marked by advanced deterioration in their state of health.

**Distribution of Cases and Deaths by Residence  
1 Jan 1983-31 Dec 1990**

	Cases	Deaths
Portugal	497	244
Aveiro	8	2
Beja	2	1
Braga	13	5
Braganca	1	1
Castelo Branco	2	1
Coimbra	11	10
Evora	3	0
Faro	20	9
Guarda	3	2
Leiria	11	6
Lisbon	296	139
Portalegre	0	0
Porto	44	22
Santarem	3	2
Setubal	51	27
Viana do Castelo	14	7
Vila Real	3	2
Viseu	5	3
Acores	2	2
Madeira	5	3
Abroad	41	26
Africa	21	11
Europe	10	7
North America	4	2
South America	6	6
Asia	0	0
Oceania	0	0
Unknown	35	15
<b>Total</b>	<b>573</b>	<b>285</b>

**Distribution of Cases by Age and Sex  
1 Jan 1983-31 Dec 1990**

Age Group	Male	Female	Unknown	Total
0-11 months	1	1	0	2
1-4 years	1	2	0	3
5-9 years	2	0	0	2
10-12 years	3	0	0	3
13-14 years	3	0	0	3
15-19 years	2	3	0	5
20-24 years	31	6	0	37
25-29 years	71	16	0	87
30-34 years	86	10	0	96

**Distribution of Cases by Age and Sex**  
1 Jan 1983-31 Dec 1990  
(Continued)

Age Group	Male	Female	Unknown	Total
35-39 years	99	10	0	109
40-44 years	73	6	0	79
45-49 years	50	3	0	53
50-54 years	30	7	0	37
55-59 years	18	0	0	18
60-64 years	16	2	0	18
65+ years	8	4	0	12
Unknown	8	1	0	9
<b>Total</b>	<b>502</b>	<b>71</b>	<b>0</b>	<b>573</b>

**Distribution of Cases and Deaths**  
by Opportunist Disease Category  
1 Jan 1983-31 Dec 1990

Disease Category	Cases	Deaths
Opportunist infection	450	211
Kaposi sarcoma	56	29
Opportunist infection + Kaposi sarcoma	56	29
Lymphoma	15	10
Encephalopathy	7	5
Emaciation syndrome	4	2
Lymphoid interstitial pneumonia	1	0
Others	0	0
<b>Total</b>	<b>573</b>	<b>285</b>

**Pathology/Risk Groups Distribution**  
1 Jan 1983-31 Dec 1990

Risk Behavior Groups	Pathology							Total
	OI	KS	OI+KS	Lymph	Enceph	Emac.S.	LIP	
Homosexuals or bisexuals	177	41	33	9	2	1	0	263
Drug addicts	64	1	0	0	1	0	0	66
Hemophiliacs	23	1	0	0	0	0	0	24
Homosexual drug addicts	4	1	0	1	1	0	0	7
Heterosexuals	135	9	5	5	1	1	0	156
Transfused	23	1	0	0	2	1	0	27
Mother/child	3	0	0	0	0	1	1	5
Unknown	21	2	2	0	0	0	0	25
<b>Total</b>	<b>450</b>	<b>56</b>	<b>40</b>	<b>15</b>	<b>7</b>	<b>4</b>	<b>1</b>	<b>573</b>

OI = Opportunist infection; KS = Kaposi sarcoma; OI + KS = Opportunist infection + Kaposi sarcoma; Lymph = Lymphoma; Enceph = Encephalopathy; Emac. S. = Emaciation syndrome; LIP = Lymphoid interstitial pneumonia