

# CDC fires health official who blew the whistle on AIDS in Florida

by John Grauerholz, M.D.

Gus Sermos, a public health adviser from the Atlanta Centers for Disease Control, assigned to Florida to investigate the extent of the AIDS epidemic there, was abruptly moved to another assignment for "overzealous" execution of his job. Sermos had charged the CDC with misusing federal funds, and had challenged the CDC's contention that "environmental factors" have nothing to do with AIDS; he cited the now-famous case of Belle Glade, Florida, a poverty-stricken sugar-cane plantation community which has an unusually high number of AIDS patients from No Identifiable Risk (NIR) categories.

Defying a CDC gag order, Sermos charged, in testimony before the state legislature on Jan. 7, 1986, that little or nothing is currently being done for AIDS surveillance in the state.

The latest chapter in the CDC's cover-up of the AIDS problem in southern Florida, of which Belle Glade is only the most widely publicized example, began on Nov. 26, 1985, when Sermos received a phone call from his supervisor in Atlanta, David Collie, who informed him that his assignment in Florida had been terminated and ordered him to report to Atlanta for a new assignment on Dec. 2.

Collie explained that John Witte, M.D., of the Health Program Office of Florida's Department of Health and Rehabilitative Services (HRS) had ordered Sermos's removal from Florida due to a series of articles in the *Miami Herald* regarding Florida's AIDS program. The articles, by reporter Steve Sternberg, pointed out alleged inconsistencies and inadequacies in the management of the AIDS program in Florida by HRS officials.

Florida's AIDS program is federally funded by annual grants to the Health Program Office of HRS, which is directed by Dr. Witte. The funds are granted from the CDC in "co-operative agreement" with the Florida officials. According to Sermos, "In several specific instances the federal funds have not been and are not being utilized by the Health Program Office for the purposes for which they were granted."

A confidential CDC report critical of the program, which was leaked to the press, charged that Florida spent the bulk of its federal AIDS funds in the north of the state, although the majority of cases were in Dade County and contiguous areas of south Florida. The report also reported that the state did not contact drug clinics and other logical places to find AIDS cases.

An experienced disease investigator, Sermos had been assigned to investigate and report AIDS cases in Florida since June 1983, when he was sent to work in Dade County, the epicenter of AIDS in the state. Before Sermos's arrival, Florida, which has the third-highest number of AIDS cases in the nation, had allowed the disease to go almost unreported. Through contacting health officials, doctors, and victims, Sermos expanded the state's case file from 98 to over 1,100 cases.

Sermos contends that the CDC allotted its funds in such a way as to guarantee they would be misspent, and thus frustrate the effort to gain an accurate assessment of the full magnitude of the problem in Florida. On Jan. 7, 1986, he testified before hearings in Tallahassee held by State Sen. Roberta Fox, chairman of the committee which oversees HRS, that little was being done for AIDS surveillance, and that, in particular, Drs. John Witte and James Howell, the responsible officials, were doing nothing about it. Senator Fox promised to bring this to the attention of Gov. Bob Graham (D).

Prior to his testimony, Sermos had been informed by Larry Zyla of the Atlanta CDC, that he was not approved to testify before the committee. CDC informed the Senate that Sermos did not represent the CDC and was only testifying as a private citizen. Certainly in his desire to document the full extent of the AIDS problem, and especially the possible role of environmental and other factors, he definitely does not represent the CDC line on AIDS, as the following incident indicates.

In July 1984, Sermos sent a letter to Dr. Harold Jaffe of the CDC AIDS Task Force, informing him of the unusual pattern of AIDS in Belle Glade and its possible relation to environmental factors. Jaffe's reply was to dismiss the findings as of no significance and to discourage further investigation of the situation.

## Environmental factors ruled out

The position of the CDC was stated by its head, Dr. James Mason, acting assistant secretary for health of the U.S. Department of Health and Human Services, in a letter to Warren Hamerman, director of *EIR's* Biological Holocaust Task Force, dated Aug. 27, 1985. Dr. Mason wrote:

In your letter you mentioned specifically the cur-

rent outbreak of the acquired immunodeficiency syndrome (AIDS) in Belle Glade, Florida. At the invitation of the Florida Department of Health and Rehabilitative Services, the Centers for Disease Control (CDC) has been conducting an investigation of a cluster of cases of AIDS in Belle Glade in cooperation with local public health officials. To date, most of the patients reported from Belle Glade have known risk factors for AIDS, such as homosexuality or intravenous drug use. If the AIDS virus were transmitted by insects or crowded and poor living conditions, we would expect more of the patients to be children. Although some migrant farm workers encounter problems with housing, health care, education, and other socioeconomic conditions, as seen in Belle Glade, no available evidence establishes a cause and effect relationship between socioeconomic conditions and transmission of HTLV-III, the virus that causes AIDS.

The State of Florida is requesting additional assistance from CDC to evaluate the occurrences of AIDS and HTLV-III infection in the Belle Glade community. Included in the proposed investigation will be epidemiologic case-control studies to determine the risk factors possibly associated with HTLV-III infection in this population. Factors associated with environmental conditions will be included in these studies. The Florida application is being reviewed at this time.

This statement of the situation in Belle Glade was totally false. At the time of this letter, Belle Glade had 46 reported AIDS cases in a population of 20,000 people, the highest rate in the United States, and probably in the world, and 25 of these cases were among non drug-abusing, non-homosexual, non-hemophilic persons, whose only common characteristic was residence in a slum area.

This situation was first widely reported by Drs. Mark Whiteside and Caroline MacLeod of the Institute for Tropical Medicine in Miami, Florida, at an international conference on AIDS held in Atlanta, Georgia in April 1985. Since that time, the response of CDC and other federal agencies has been to deny the findings and impugn the credibility and personal integrity of Drs. Whiteside and MacLeod.

Why this refusal by government health authorities to confront the reality of the AIDS crisis? The scientific facts conflict with cherished illusions held by an administration which is committed to enforcing the austerity exemplified by the Gramm-Rudman amendment. To admit the implications of the Belle Glade AIDS cases, would force the administration to face up to the widespread devastation of nutritional and sanitary infrastructure in the United States, and to change its economic policies.

Instead, those doctors and scientists who tell the truth are given the treatment which Sermos received. The fol-

lowing quote from the *Miami Herald* of Dec. 7, 1985 correctly identifies the consequences of this sort of practice:

The public properly must wonder whether AIDS research might suffer with him gone. *Given his fate, how aggressive will any replacement dare be?* With AIDS cases growing geometrically, Florida ill can afford to lose the momentum that Mr. Sermos established. He ought to be left in Florida, where he's desperately needed, and given more help. Whether or not he was overzealous or had run-ins with state officials, the Federal Government must not allow state health officials to impede the national effort to combat this plague.

Sermos has now filed formal allegations of misconduct in the handling of the Florida AIDS program, including against his Atlanta superiors, David Collie and Larry Zyla, as well as CDC Personnel Director Carl Crittenden. These

---

*Defying a CDC gag order, Florida public health adviser Gus Sermos charged, in testimony before the state legislature, that little or nothing is currently being done for AIDS surveillance in the state. He also filed allegations of misconduct against his supervisors from the Atlanta CDC.*

---

charges are now being reviewed by attorneys of the Office of Special Counsel of the Merit System Promotional Board, for possible recommendation that the inspector general of the Department of Health and Human Services do a complete investigation.

In addition, Sermos has contacted Florida Sen. Lawton Chiles (D), who is conducting an inquiry into the situation.

The outcome of these legal maneuvers is doubtful, as long as the underlying policy of avoiding the full magnitude and implications of the AIDS situation in southern Florida remains entrenched in the federal health bureaucracy. This willful suppression of scientific evidence is consistent with the general approach to public health exemplified by funding for rat control in Miami, which was cut from a million-dollar-a-year program to \$80,000 a year, even before Gramm-Rudman!

Unless steps are taken to avoid the spread of the unsanitary conditions of Belle Glade, then diseases like AIDS, tuberculosis, and dysentery will continue to spread.