

Brazil faces 'apocalypse,' say experts in conferences on AIDS

by Silvia Palacios

The spread of AIDS, combined with other epidemic and endemic diseases, threatens Brazil with imminent apocalypse. This crisis must be dealt with by radical changes in the conditions that caused it, or Brazil will sink into something worse than the 14th century Black Death. This conclusion was drawn at a series of public conferences co-sponsored by the Schiller Institute, *EIR*, and the leading health institutions of Brazil, during Dr. John Grauerholz's tour of the country in early February.

The conferences featuring *EIR*'s medical editor Dr. Grauerholz drew 700 people in Sao Paulo and 100 in Rio de Janeiro, and had an impact all over Ibero-America, with wire stories appearing in the major dailies of Mexico and Argentina, *Excelsior* and *Clarín*, and Peru's *El Comercio*.

"The last great pandemic, the Spanish Flu, killed 230 million people, but many have already forgotten it. What is going to happen with AIDS in Brazil under the present economic, social, and cultural conditions and with this obsolete public health system? In a country in which 50% of the population suffers malnutrition, and 500,000 children die every year from the biggest disease in the Third World: hunger?" asked Dr. Ricardo Veronesi, organizer of the event in Sao Paulo.

The myth that only the so-called risk groups catch and transmit AIDS, as claimed by Brazil's impotent official anti-AIDS campaign, was refuted with devastating proof by each of the speakers. At the same time, they alerted government authorities to take effective action without delay to stop AIDS from spreading. "The safe sex campaign will not slow the advance of AIDS," was the headline with which Brazil's influential educational TV news program announced Dr. Grauerholz's visit to Brazil.

Brazil is second in the world, after the United States, in reported AIDS cases. Although official statistics only recognized 1,013 cases in 1986, realistic estimates are that there are 3,000 to 5,000 cases and a horrifying rate of doubling

every three months. Specialists say that there are already 500,000 to a million AIDS carriers. Moreover, the "environmental co-factors" which act as catalysts to rapid propagation, in which regard Brazil rivals Africa in hunger and poor health, make it a major source of infection for the rest of the hemisphere.

On Feb. 5 the city's major newspaper, *Folha de São Paulo*, ran a banner headline on page 12: "AIDS Could Extinguish Man, Alerts Doctor from U.S.A." The paper reported, "U.S. pathologist John E. Grauerholz said yesterday in SPaulo that the only way to check the growth of 'the worldwide AIDS epidemic which could lead to the extinction of the human race' is through large-scale application of tests which detect the virus of the disease. . . ."

"The line of action he defends as a representative of the Schiller Institute (a U.S. entity which studies the medical, social and economic aspects of diseases) and as medical consultant to the *Executive Intelligence Review* Biological Holocaust Task Force, conflicts with the prevention programs developed today. For him, the programs are of little efficacy."

'Africanization'

The conferences began with the presentation of the first computerized AIDS model, commissioned by Lyndon H. LaRouche, a candidate for the 1988 U.S. Democratic presidential nomination. The results leave no room for doubt that AIDS is a pandemic which could wipe out the human race.

What had the greatest impact on the audiences in both Rio and Sao Paulo was Dr. Grauerholz's demonstration that once the fast-track AIDS-spreading methods had infected a large mass of carriers belonging to the so-called risk groups, the infection spreads through a variety of "slow-track" methods which increasingly affect the general population. Brazil, like the United States, is rapidly reaching the saturation point by the "fast track."

In Sao Paulo, the event was co-sponsored by the Schiller Institute, the International Society of Infectious Diseases, the Brazilian Society of Infectology, and the Infectious and Parasitological Disease unit of the University of Sao Paulo, directed by Dr. Ricardo Veronesi, the former Sao Paulo city health commissioner. In Rio de Janeiro, it was sponsored by *EIR*, the Rio de Janeiro Physicians Union, presided by Dr. Crescencio Antunes, with the participation of Dr. Mario Barreto Correa Lima, Professor of Medicine, Biological Sciences, and Health at the University of Rio de Janeiro. He said, "Brazil is a source of infection. Doctors from other countries, especially Uruguay and Argentina, report that 50% of their [AIDS] cases were infected in Brazil, especially in the state of Sao Paulo."

Dr. Ricardo Veronesi emphasized, "In this country, AIDS is spread unimpeded, as in the case of the [Sao Paulo] penitentiary, where, of 500 homosexuals, 50% or 60% are infected and obviously infecting the rest of the prisoners, living amidst filth. But state authorities are irresponsible, and don't test the whole jail for AIDS. They say it would cost a lot of money. Could it be that human life has a price?"

In Sao Paulo and Rio de Janeiro, Dr. Veronesi and Dr. Barreto both alerted the audience on the medieval situation of public health. Dr. Barreto said that the spread of AIDS in Brazil combines the characteristics of large cities such as San Francisco and New York with a situation of African-style misery. "Look at the Northeast, where life expectancy is under 40 years. The undernourished population already has a precarious immunological system."

At the same time, new information provided by the Health Ministry and presented by the World Health Organization AIDS chief Dr. Jonathan Mann at meetings attended by *EIR* representatives showed that 30% of Brazilian AIDS cases had African symptomology.

The lack of control over blood banks in Brazil is becoming criminal. Dr. Veronesi indicated, "Tests began in the blood banks two years ago; we initially sent 30 samples to Dr. Robert Gallo. It turned out that three were positive; and the important thing is that those three donors gave at a five-star class blood bank and nobody did anything." This question was dealt with specifically by Dr. Silvano Wendell, who spoke on: "AIDS by Transfusion in Blood Banks; Who Is Responsible for the Crime?"

The demand for massive testing to locate carriers was a clamor during the meetings. "In Brazil, even government agencies have fought against testing for cost considerations. . . . The cost argument cannot stand up; a pack of 200 tests costs \$191 in the United States," Dr. Barreto observed.

The second major aspect of the *EIR* model presented by Grauerholz, was the growing role of environmental co-factors, such as insects and autocatalytic reactions between AIDS and other diseases such as tuberculosis.

As was stated by Dr. Barreto, tuberculosis cases are skyrocketing. There is a new case every half hour, which means an annual increase of 18,000 new cases. On top of this are

the millions of people suffering from chagas disease, schistosomiasis, malaria, and leprosy. Since Brazil has one of the largest homosexual and transvestite communities, the environmental co-factors which rapidly propagate AIDS may be even worse. There are 10 million people with chagas, and 15 million with schistosomiasis. Several million with tuberculosis, 250,000 with leprosy, 500,000 infected with malaria each year, which could rapidly grow to a million cases as indicated by some health authorities.

It is worth saying that Dr. Veronesi just updated his study, "AIDS in Brazil and the Third World," in which he reports the first symptoms shown by a patient with both AIDS and schistosomiasis.

"All the epidemics are growing. . . . Dengue reappeared and attacked 500,000 people here. Four kilometers from this room is found the *aedes aegypti* mosquito," the transmitter of dengue and yellow fever, said Dr. Veronesi. Going into more detail on the role of mosquitoes, Veronesi recalled the experiments made at the Pasteur Institute in France, and asked people to be aware of the density of mosquitoes which have already inundated the cities of Rio and Sao Paulo. "All that is needed for yellow fever to break out among the population is for somebody to get the bright idea of bringing one of those infected monkeys from the reservations to adorn his city garden," he said.

The question of tropical conditions was also amply discussed by Dr. Grauerholz with physicians from the Army Central Hospital during a lecture which he was invited to give there.

Health revolution

The clear conclusion was that the struggle against AIDS would not be successful if it were restricted to "sanitary sex" campaigns, which—even if they were effective—are now too late to hold back the new Black Death. What is necessary—he dramatically emphasized—is a health revolution in the country.

"AIDS will have apocalyptic characteristics; two years ago I foresaw that situation, which was not then endorsed by the World Health Organization. But three months ago, WHO director, Dr. Mahler confessed and asked to be pardoned for having minimized the problem. Today we all should take responsibility for public health. [We should make sure] that AIDS control programs are not managed by homosexuals, but by scientific physicians. We need to change lifestyle, may God have pity on us," concluded Veronesi.

For their part, Dr. Barreto and Dr. Antunes, in Rio de Janeiro, pointed out that the solution to the problem lies in the economy, which in Brazil is still being run to pay debts to the International Monetary Fund. "The debt will not be paid with the health of the people," they concluded. And as a participant in one of the meetings said, "They are going around saying Brazil will soon be the fifth world power. . . . I think we are the first, but in diseases, malnutrition, and infant mortality."