

---

## Berlin AIDS Congress

---

# Official policy is a scandal

by Wolfgang Lillge, M.D.

The Ninth International AIDS Congress, held in Berlin on July 6-11, brought even less new knowledge about this pandemic than did preceding workshops, with the one exception, that the “invisible hand” of the AIDS establishment was unusually blatant in its effort to keep the entire mammoth convention, with its 15,000 participants, under a tight rein. The few tangible results and perspectives in AIDS research were plowed under by a series of scandalous incidents during the congress, which showed how a controversial, official AIDS policy is being ruthlessly put through regardless of the consequences.

The convention was policed by the militant homosexual pressure group Act Up, which used harassment tactics against the booths of the pharmaceutical firms and non-conforming AIDS groups to ensure that no one deviated from the standard line of pushing AIDS education, self-help, and condom advertisements, with all AIDS research being channeled exclusively into those areas.

A few booths came under particularly heavy attack. These included those of the French government, of the pharmaceutical firms Hoffman-LaRoche and Astra, and of the Swiss AIDS Education Association, which explicitly distanced itself from the official AIDS strategy. These booths were repeatedly wrecked by the Act Up militants. The action against the Swiss AIDS Education Association was even announced beforehand, so that reporters could be on the scene to film the booth being destroyed. One had to wonder why there was such a strong police presence, in addition to private security hired by the conference’s sponsors, if they could not even stop such violence.

### Inactivity as dogma

Looking at the current international policy regarding AIDS, one cannot help seeing a parallel in the inactivity of the West toward the gruesome genocide going on in Bosnia-Herzegovina. All effective measures, such as the lifting of the arms embargo against Croatia and the Bosnian Muslims, or surgical air attacks against Serbian positions, have been rejected, with the excuse that the war must not be heated up. Is the U.N. Security Council proceeding the same way in Bosnia as the World Health Organization (WHO) has been proceeding

on the AIDS issue? Should the countries of Africa, Asia, and Ibero-America, which are suffering the brunt of the HIV pandemic, be deprived of the most effective means of combatting this plague? One thing is certain: Condoms and AIDS education—reminiscent of the “humanitarian aid shipments” to Bosnia which have only served to soothe guilty consciences—are no solution to the world’s AIDS problem.

One must keep firmly in mind, that almost four-fifths of all cases of HIV infection are in the developing sector. The WHO estimates the current figure at about 14 million, and forecasts 40 million infected by the year 2000—which is a very conservative estimate. The Harvard School of Public Health is talking about as many as 100 million infected by the end of this century. The situation in Africa is currently the most desperate, but all indications are that within a very few years, the HIV virus will take an even more terrible toll in the population-dense countries of Asia. Some 42% of the 100 million infected predicted by the Harvard School of Public Health are expected to be in Asia.

From Uganda we hear cries for help; the country is being completely destroyed by AIDS, because the social structure upon which the state depends is simply dying out. Up to 20% of the sexually active population of this eastern African country is already infected with the immunodeficiency disease. Large-scale educational campaigns for “safer sex” have accomplished nothing. In the meantime, one out of every three Ugandan families has had to take in orphaned or widowed family members.

The consequences of AIDS in Africa are already comparable to the devastation wrought by a world war. “Every family has lost someone,” reported Theresa Kaugage, member of a Tanzanian aid organization, at a workshop at the Berlin conference. AIDS is wiping out all the modest progress made heretofore in health policy in Africa. Average life expectancy rose from 46 to 63 years between 1960 and 1990, and infant mortality went down from almost 25% to 11% during that time. AIDS also paves the way for other plagues such as tuberculosis, which is now once again spreading completely out of control.

### Crushed hopes

Then came a glimmer of hope in 1989, when reports came from Kenya that people at the Kenyan Medical Research Institute (KEMRI) in Nairobi had discovered an extraordinarily effective method of treating AIDS patients. In a detailed scientific presentation, the results of the first treatment successes were published in the *East African Medical Journal* in July 1990. The treatment involves administration of very small doses of alpha-interferon, which must be ingested through the mucous membrane of the mouth; no other means of ingestion has proven effective. The scientists at KEMRI had hit upon this method, because they knew the effectiveness of interferon in the veterinary treatment of virus infections of animals. The reported successes were massive: In all

38 patients who began treatment with this method, all AIDS symptoms had disappeared within a few weeks. The Kenyan government proceeded to finance the treatment of an additional 3,000 patients, 97% of whom were able to resume their normal lives.

Following this, a few clinics in the United States began tests with the treatment, and they substantially corroborated the Kenyan results. In addition, there was the added advantage that Kemron or Immunex, as the drug came to be called, could be produced relatively inexpensively, and that there were no patents to drive up the price. Was this the sought-for hope for Africa, the straw which could finally be grasped?

At the Berlin congress, the entire therapeutic initiative with low doses of alpha-interferon was swept off the table in a single demonstrative act. At one of the main workshops on new immunotherapies, directed by M. Dietrich from the Tropeninstitut in Hamburg, Germany and R. Schooley from Denver, Colorado, it was announced that an additional paper had been added onto the program, which would deal with the method developed in Kenya. They then presented an abbreviated version of a study from Uganda which had been prepared by scientists from the Kampala Blood Transfusion Center in Uganda, in collaboration with the WHO in Geneva. The study claimed that low doses of interferon have *no effect* on AIDS patients, and that indeed in certain parameters they resulted in a worsening of the disease in comparison to an untreated control group. At the workshop it was emphasized that *this* study was the first to come out of Africa which met high international scientific standards, and that its results were unassailable. Just to make the message crystal-clear, after the paper was presented, a WHO official stepped to the microphone to state that anyone who still talks about the effectiveness of this method, is not scientifically credible.

So is this how one should deal with a question which could well decide whether millions of human beings live or die? Can such a final and conclusive judgment be delivered on the basis of this one study, inserted at the last moment into the conference program, and whose full text could not even be obtained? The demonstrative nature of this "death sentence" pronounced for the Kenyan therapy leads one to suspect that other motives might perhaps be at work.

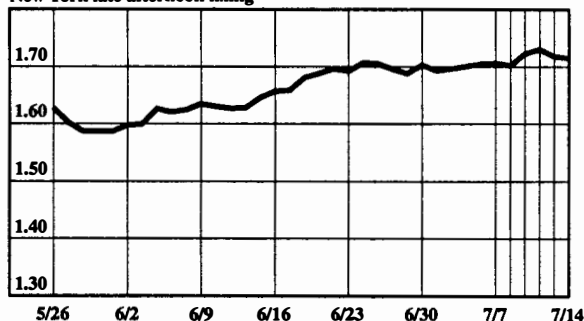
And even if a final resolution of this question will only be possible once the details of the counter-study become available, it is also possible that the procedures for administering the drug were not scrupulously followed. The researchers and doctors in Kenya, as well as Dr. Abdul Alim Muhammad, who works with Kemron at a private clinic in Washington, D.C., have repeatedly emphasized that the drug is only effective if a very precise regimen of ingesting the drug is adhered to. Did the Ugandan study perhaps fail to follow this regimen?

It would be a fatal error indeed, if such a promising and feasible method for treating AIDS victims in the developing countries were to be eliminated by the mere stroke of a pen.

## Currency Rates

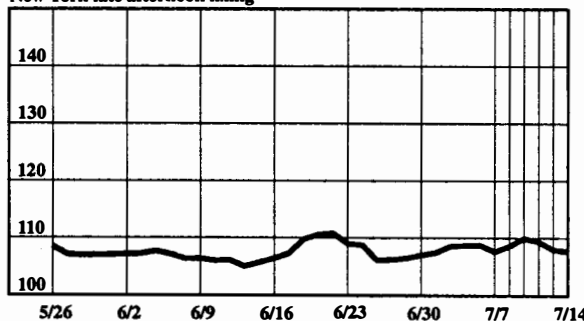
### The dollar in deutschemarks

New York late afternoon fixing



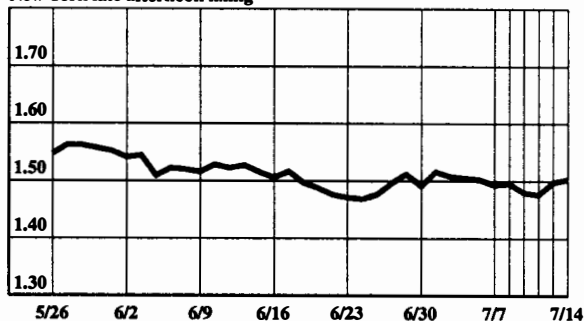
### The dollar in yen

New York late afternoon fixing



### The British pound in dollars

New York late afternoon fixing



### The dollar in Swiss francs

New York late afternoon fixing

