

# International AIDS seminar in Brazil sets policy yardsticks for continent

by David Ramonet and Valerie Rush

The successful conclusion of the Second International Conference on AIDS, held in São Paulo, Brazil on Sept. 25-26, has called the question on a competent AIDS policy not only for Brazil, but for the entire Ibero-American continent. "Insects can transmit AIDS" was the message conveyed to this vast tropical nation by specialists from the United States, Europe, and Ibero-America, in direct repudiation of official policy, dictated by the World Health Organization, which views the mortal epidemic as a venereal disease controllable through "safe sex."

The conference, co-sponsored by *EIR*, various districts of Brazil's Rotary, Lions, and Service Clubs, and the Brazilian Society for Infectious Diseases, was also endorsed by at least seven of Brazil's leading companies, and drew close to 1,000 participants each day, including government, military, health, and business professionals. The conference intersected an intense debate within Brazil—a country with the unenviable record of the world's second-highest reported incidence of the disease—over how to halt the epidemic.

It was no accident that on the day of her arrival in São Paulo, Dr. Caroline McLeod of the Institute of Tropical Medicine in Florida, captured the headline of São Paulo's leading daily, *Folha de São Paulo* with the title, "Doctor Says Insects May Have Transmitted AIDS in the U.S." Dr. McLeod shared the podium at the two-day AIDS seminar with Dr. Ricardo Veronesi, head of the Brazilian Society for Infectious Diseases; Dr. Jonathan Tennenbaum, European director of the Fusion Energy Foundation; Dr. John Grauerholz, medical coordinator of *EIR*'s special AIDS investigative task force; Dr. Bertha Farfán of Central Hospital in Mexico City; and Dr. Luiz Antonio Louris, of the Brazilian health ministry.

In the two days prior to the conference, São Paulo press and television, along with national media, CBS radio of the United States, and the magazine *Istoe* extensively publicized the pending event, including frequent interviews with the participants. A 90-minute television interview with the foreign participants and Dr. Veronesi had a viewing audience of over 8 million.

## A matter of national sovereignty

The significance of the conference, while focused on the

AIDS threat, in fact went far beyond that issue. As was emphasized at the conference, any solution to the AIDS crisis must not only address the medical truths about the disease now being assiduously covered up, but also: 1) the economic devastation in, especially, the heavily indebted developing-sector nations, which has created the basis for an epidemic breakout of the disease, and 2) the scientific and technological capacity required in *both* the advanced and developing sectors to come up with proper treatment, and a cure.

These critical issues are at the center of a fierce battle being waged inside Brazil by nationalist forces in both political and military circles, who insist that submission to the debt policies of the International Monetary Fund and international financial community is destroying the nation's ability to steer its own destiny. The recent announcement of Brazil's success in mastering the complete nuclear fuel cycle, for example, was not only intended as a challenge to the science and technology "cartel" run by the economic superpowers, but also a declaration of Brazilian intent to economically catapult itself into the 21st century.

## A 'criminal' argument

On the first day of the conference, the audience heard Dr. Louris, an official of the Brazilian health ministry, define AIDS as a sexual disease, and urge an "educational" approach. He argued that the epidemiological profile of AIDS had not changed in Brazil, this despite opening statements by Dr. Veronesi that the country now had an estimated 1 to 1.3 million infected. When sharply questioned on official health policy toward the epidemic, Dr. Louris admitted that his ministry had allocated a mere 16 hospital beds for AIDS patients. He stubbornly insisted, "There is absolutely no possibility of mosquito transmission."

Dr. Veronesi then took the floor to rebut the ministry epidemiologist, angrily charging, "At the Ministry of Health, there are nothing but incompetents and imbeciles. The argument that has been used to refute the possibility of mosquito infection is a criminal argument." He explained that ministry officials had determined against the mosquito transmission thesis because the incidence of AIDS in children—fully as vulnerable to mosquito assaults as adults—is quite low. *Ipsa*

*facto*, mosquitos can't transmit AIDS!

Dr. Veronesi then presented the audience with a series of graphs profiling, by age group infected, the incidence of a disease which he at first refused to identify. The graphs showed the lowest incidence of infection in the 1-3 year age group, and the greatest in the 30-50 year age group. He then identified the disease as *malaria*, which is universally recognized to be transmitted by the *Aedes Aegypti* mosquito.

The afternoon session, featuring Dr. Caroline McLeod, was eagerly awaited by the audience, as she—together with Dr. Mark Whiteside in the United States—has perhaps done the most extensive research on AIDS incidence in a tropical region, Belle Glade, Florida. Dr. McLeod noted that the poor and mosquito-plagued rural area they have investigated has conditions comparable to much of Brazil, with similar high rates of AIDS infection among non-high-risk groups (that is, heterosexual and non-drug-abusing). They developed their hypothesis on the mosquito, dubbed “the flying syringe.” Their research has not yet yielded laboratory proof of AIDS infection by mosquito, but they have been able to show that dengue fever, a recognized co-factor in AIDS infection, is transmitted by the mosquito.

Dr. Veronesi later referred to the Belle Glade story to present his own hypothesis on the possibility of mosquito transmission. He discounted the official claim that an American homosexual was responsible for bringing AIDS to Brazil, noting that because of Brazil's tropical conditions and the “African” characteristics of the disease, it was more likely that AIDS had come to Brazil through Brazilian workers returning from Africa. In a high percentage of such cases he was able to study, Veronesi observed the existence of a virus known as “maguari,” which is transmitted by mosquito.

“True, there are no laboratory proofs yet,” the Brazilian specialist admitted, “but neither are there laboratory proofs of sexual transmission.” He concluded that without the proper scientific research, people have been led to believe “only what they see.”

Second-day presentations at the conference offered the results of ongoing research on AIDS and related epidemic diseases since 1974. Dr. Grauerholz described the research, begun under the sponsorship of *EIR* founder Lyndon LaRouche, which foresaw that the absence of continuous scientific and technological advances *as reflected in economic and social progress* must necessarily bring about conditions for the kind of “biological holocaust” occurring in Africa, and now threatened globally.

Dr. Bertha Farfán presented data on the AIDS crisis now surfacing in Ibero-America, with emphasis on the environmental factors that are facilitating its propagation. She stressed that the role being played by World Bank and International Monetary Fund austerity programs, in collapsing investment in health, sanitation, and basic infrastructure while reducing living standards generally across the continent, has already caused the widespread return of diseases once believed con-

quered, such as malaria and yellow fever.

Dr. Jonathan Tennenbaum, who on the first day had presented a computer-assisted projection of the AIDS epidemic globally, concluded the conference by elaborating the urgency of developing new biophysical methods for finding a cure for AIDS. Coverage of his presentation in the Sept. 27 edition of *O Estado de São Paulo*, emphasized Tennenbaum's insistence that space-age research could help revolutionize AIDS tests.

He reported that the space program in the United States, for example, had suspended research on a laser system which could, in four minutes, “give the doctor, by means of a computer, a list of all the infections in the patient. Unlike existing AIDS diagnostics, lasers being developed at Los Alamos Labs in New Mexico do not depend on spotting AIDS antibodies, but rather, when the [HIV] virus infects a cell in the body, there are changes in the physical structure of the living tissue. We could measure that form of change by passing a laser through the tissues. We would look for different angles of diffraction of the light, and see the finger prints of the virus.”

*O Estado* reported that Tennenbaum identified another advantage of the optical biophysics approach, in that all viruses, microorganisms, and bacteria show up at once. Further, “If it operated 20 hours a day, it could perform 1,200 tests. The price of a test would be \$5, that is, the machine would make \$6,000 a day. In a year of operating, its \$100,000 to \$200,000 cost would be paid off.”

Another Brazilian daily, *Jornal da Semana*, reported that Tennenbaum called for everybody to be tested twice yearly, with quarantine of carriers. “By economizing today, governments are generating a disaster in the coming year,” he said. He ended with the assertion that nothing less than a scientific revolution could conquer AIDS, “the black death of the 20th century.”

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