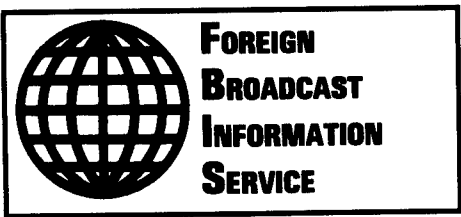


JPRS-TEP-89-011  
23 JUNE 1989



# ***JPRS Report***

# **Epidemiology**

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# Epidemiology

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## MOZAMBIQUE

### Statistics on AIDS Cases Released

54000072b Maputo NOTICIAS in Portuguese  
10 Apr 89 p 1

[Excerpts] Mozambique presently lists 29 persons with Acquired Immune Deficiency Syndrome (AIDS), in addition to 11 known deaths.

This figure was announced Thursday by Mozambican Vice Minister of Health Dr Igrejas Campos, to journalists at a press conference on the occasion of World Health Day, which was the previous Friday.

Dr Igrejas Campos revealed that among the victims was a child 11 months of age. "This means that a second generation has also been infected and therefore that the number of persons infected by the virus in Mozambique could be greater," he said.

The vice minister said that some suspected of being carriers of the virus are under observation. He added that there are laboratories at all of the blood banks in the country equipped to reject the blood of donors who show indications of the AIDS virus. [passage omitted].

At the press conference, in which a representative in Mozambique of the World Health Organization (WHO), Dr Manuel Boal, also participated, Dr Igrejas Campos stressed the role played by the media in sanitary education for the general public, adding that this education should not be limited only to the risks of AIDS.

The theme of World Health Organization Day this year is "Let's Talk About Health," an appeal for the media to play its role as a means of communication in sanitary education.

It was in this view that Dr Manuel Boal spoke, saying that communication can be the determining factor on the African continent in modifying certain behavior.

### Measles Epidemic Hits Zambezia Province

#### Thousands Die

54000072a Maputo NOTICIAS in Portuguese  
7 Apr 89 p 1

[Article by Daniel Cuambe]

[Text] Yesterday in Quelimane NOTICIAS learned that in Alto Ligonha, Zambezia Province, 3,800 persons died in the months of January and February, victims of an epidemic of measles. All the victims had been displaced from their homes by the terror of the armed bandits.

In January, 51,400 displaced persons were in the administrative post of Alto Ligonha, Gile district.

Nongovernmental organizations involved in assisting these refugees estimate that the number of deaths due to poor sanitary conditions could be greater than 3,800, according to the information of our newspaper.

The government is now increasing its efforts to alleviate this serious situation. Relief operations are being planned involving the Health Department, the Emergency Program, and others.

Officials at Quelimane cite the immediate reactivation of an airlift already being financed by the Italian Government for the transport of 1,400 tons of supplies to parts of the province where the displaced population is concentrated.

Representatives of the nongovernmental organizations say that 5,000 people could soon lose their lives at Alto Ligonha if measures are not taken.

At the Gile district seat there are 36,000 displaced persons, and there deaths of 8 or 9 persons per day are occurring.

An identical situation exists at Ile, where 25,000 war refugees are being accommodated in 12 centers.

### Displaced Persons Camps Hit

54000072a Maputo NOTICIAS in Portuguese  
11 Apr 89 p 8

[Text] We have learned that loss of human life by the thousands is afflicting Zambezia Province as a result of the recent outbreak of measles in the districts of Pebane and Gile, the former located on the coastal strip and the latter inland in the central region of the country.

At the administration post of Alto Ligonha, less than 50 km from the Gile district seat, there are indications that the region is engulfed in a veritable wave of mourning as official figures reflect many hundreds of deaths.

Sources at the Department for the Prevention and Struggle Against Natural Disasters (DPCCN) contacted by NOTICIAS in Quelimane last weekend confirm that at least 3,800 persons died in the months of January and February, victims of measles, which found fertile ground in the famine that afflicts the entire province.

This source cites very recent information from an official of the organization, who is stationed in Gile and some days ago visited Alto Ligonha.

It is reported that the destabilizing operations of the armed bandits make it extremely difficult to gain access to this post.

On his way to that destination the official witnessed the death of at least seven of his companions, devoured by crocodiles while attempting to cross a river.

This example, according to our informants, illustrates unmistakably the serious obstacles to normal access to this zone, which is deprived of effective assistance.

As a result, prospects are dark for relief measures, a high health official of Zambezia told our correspondent. He emphasized that when measles attacks an organism in a state of serious malnutrition, such as exists generally in the rural communities of Zambezia, widespread death results.

"The situation is getting worse," emphatically affirmed the DPCCN official, who then added that the floods which have recently affected vast regions of the province have complicated the problem of bringing relief supplies into zones lacking permanent assistance.

We also found that at least 20,000 people at the Alto Ligonha administrative post have not been receiving any kind of assistance for some time. From what is known, this figures does not reflect reality, since according to other official figures to which NOTICIAS has access there are 51,400 displaced persons in Alto Ligonha.

It is estimated that the thousands of displaced persons in Gile are distributed among 14 refugee centers, and it was learned that very recent reports indicated that eight or nine persons were dying in each of these centers.

But the DPCCN sources go further and state that the number of daily deaths in the districts of Gile land Ile, the latter located in Alto Zambezia, is much higher. They go so far as to give a number of 100 per day.

We learned further that practical means exist in the provincial capital to alleviate the devastating effects of the disease raging in Pebane and Gile and to distribute food to the populace.

For example, as soon as the health officials of Zambezia learned of the measles outbreak to which we have referred, they organized brigades which at the time we left Quelimane last week end were ready to depart at any moment for the affected zones to administer vaccinations.

"They are prepared to carry with them all that is necessary," a reliable source confirmed.

For their part, some of the nongovernmental organizations located in Quelimane expressed concern about the present situation in Pebane and Gile but haven't indicated what steps are to be taken.

At the same time there is great agitation in the provincial capital for reactivating general relief activity in the whole province.

The efforts are such that NOTICIAS was informed of the presence last week in Quelimane of a brigade from the central authorities concerned with these matters, headed by Vice Minister of Commerce Antonio Francisco Munguambe.

This high official went last Sunday to the district seat of Gile, where he established contact with the local authorities.

On that day, as on previous days, supplies arrived in Gile, but due to the reduced transport capacity they fell short of meeting the need.

The problem is getting worse, and the people have little or almost no capability for family agricultural production to sustain themselves.

## NIGERIA

**Meningitis Outbreak Kills 38 in Kaduna State**  
*54000078 Kaduna NEW NIGERIAN in English*  
*21 Apr 89 pp 1, 4*

[Article by Shittu Saude]

[Text] The Kaduna State Commissioner for Health, Mrs Sarah Hassan, has disclosed that a total of 221 persons were affected by cerebro-spinal meningitis (CSM) out of which 38 died in the state this year.

Addressing newsmen in Kaduna, the commissioner said due to the outbreak, the state government procured 50,000 dozens of vaccines and distributed to the local government areas for mass immunization.

She said the first report of the outbreak of the disease was in Kachia local government area where 85 people were affected out of which 10 died.

Reports from other areas also affected according to the commissioner was, Zaria local government 52 people affected and ten died, Saminaka had 49 people affected with ten deaths, while in Jema'a out of the 35 people affected three died.

On drug revolving fund, Mrs Sarah Hassan said the state ministry of health received one million Naira from the federal government last year.

She said the money was being used in the new General Hospital Kaduna where charges for services were introduced in January this year.

She noted that although there was a drop in the number of people visiting the hospital as a result of the fees introduced, the drug revolving programme had stabilized in [words indistinct] also said that the ministry has procured and distributed drugs worth 699,800 naira to hospitals, comprehensive health centers and clinics while arrangements were under way for the purchase of more drugs and hospital equipment for the second quarter.

She said the state has achieved 70 percent in its Expanded Programme on Immunization (EPI) against tuberculosis, whooping cough, diphtheria tetanus, poliomyelitis, measles, meningitis and yellow fever.

Mrs Hassan disclosed that the number of children dying as a result of diarrhea have greatly decreased over the years from about ten in every 100 sick in 1984 to three in every 100 sick last year since the introduction of the Oral Rehydration Therapy in the state.

On payment of salaries, she said the ministry has spent [words indistinct].

## SOUTH AFRICA

### Vaccine Production Facility Launched

54000074a Johannesburg *THE STAR* in English  
14 Apr 89 p 14

[Article by Toni Younghusband]

[Text] The South African Institute for Medical Research has commissioned a R20 million vaccine production facility which it hopes will make this country independent of imported vaccines.

At the launch of the institute's 75th anniversary celebrations last night, Professor Jack Metz said the new serum and vaccine production facility was one of the most modern in the world.

"For very many years now the institute has produced almost all the bacterial vaccines used in this country.

"With the commissioning of the new facility we will increase both the scope and amount of our vaccines with the aim ultimately of making South Africa independent of imported vaccines and also to compete on the international market," said Professor Metz.

Professor Metz said during the anniversary year there would also be much development in the AIDS field.

"Last year the institute established the first AIDS Training and Information Center in the country.

"We have this year received additional funding for the center from the private sector and we will double the present number of staff," he said.

He said the institute had also just opened a new molecular biology laboratory and one of the major programmes in this laboratory would be fundamental studies on certain enzymes of the AIDS virus as targets for the development of therapeutic drugs against the virus.

Professor Metz expressed the hope that all private organizations who had financially supported the institute in the past would continue to do so.

### Government To Establish AIDS Centers

54000074b Johannesburg *BUSINESS DAY* in English  
13 Apr 89 p 3

[Article by Dianna Games]

[Text] About R5,1m would be spent this financial year to set up AIDS advisory centers in four main cities, excluding Johannesburg, to provide information and training about the virus, and to launch another awareness campaign, the Department of National Health said yesterday.

It said the R5,1m had been added to existing activities such as blood screening, epidemiological surveys, education campaigns and supply of condoms.

This is an increase on the amount spent in the previous year of R2,5m.

Department medical services director Buks Lombard said the centers would be located in Cape Town, Durban, Port Elizabeth and Bloemfontein.

He said although they would be financially subsidized by the department, they would fall under the jurisdiction of the relevant local authorities who would decide on what programmes they would run and what training they would offer.

Johannesburg had an AIDS Training and Information Center administered by the SA Institute of Medical Research.

Lombard said government needed to promote the awareness that the transmission of AIDS was primarily a social and not a medical problem and was one which the state could not address by itself.

### AIDS 'Disaster' Predicted at Conference

54000077 Johannesburg *THE CITIZEN* in English  
24 Apr 89 p 12

[Article by Keith Abendroth]

[Text] Leaders of a range of disciplines warned in Pretoria at the weekend that AIDS had not only got out of hand in the world and South Africa but could also lead to "total disaster" for South Africa.

Speakers told a specialist conference held by Potchefstroom University that the disease was already rapidly becoming the biggest plague to threaten mankind in centuries, and that immediate action must be taken to halt its spread.

Formally opening the conference, the Director General of National Health and Population Development, Dr Coen Slabber, said that it was surprising—given the horrifying reality of the disease—that it was still spreading as fast as it was.

Figures available indicated that it had already got out of control, he said. To fight it called for a giant, multi-professional and coordinated effort drawing in many disciplines, from medicine to the church.

"AIDS is not only a medical problem—it is everybody's problem," said Dr Slabber.

Legal issues relating to AIDS, of which there are a surprising number, were detailed by Unisa law professor S.A. Strauss—including the possibility that anybody who transmitted the disease could be charged with manslaughter, attempted murder or even murder.

The Department of Health's top expert on the disease, Dr J.H. Lombard, among other speakers, said that for political and technical reasons AIDS cases were "grossly" under-reported to the authorities. But he said, it was not unlikely that world-wide there could be as many as 300,000 cases, 600,000 people with developing symptoms and 10 to 15 million carriers.

"Visible cases are only the tip of the iceberg and anybody who ignores sighting that tip is at risk of succumbing to the same fate as the Titanic," Dr Lombard said.

So far the Republic had uncovered 183 cases of the disease, mainly among homosexuals—giving rise to the titling of the disease as the "Gay Plague."

But now, he said, had spread outside that group, embroiling the Black people as well. To the extent that some predictions were that up to about 40 percent of the country's Blacks could be dead or dying of it by the mid-nineties.

"It does not respect age, sex, race, standard or creed. It is not important who you are but what you do..." said Dr Lombard.

"The fact of the matter is that it has the potential to create havoc and chaos in Africa. We are of Africa and cannot escape what happens in Africa. We must get our house in order and the time to act is now," he said.

"The Gay Plague is already turning into disaster for many normally-sexed families.

"It has the potential to become the biggest disaster for humanity in centuries. The potential not only to destroy socially, politically and to wreck the order structure, but also to land us in economic chaos."

The ethics of the private sector, relating to AIDS, were detailed by Potchefstroom University's Prof Johann Coetzee, while Defence Force chaplain Dr R. van Niekerk, spoke extensively on the religio-pastoral aspects.

Another speaker, NGK Moderator Prof Johann Heyns, spoke on sexuality and stressed that AIDS was, simply, a manifestation of how sin had affected man's nature.

God, he said, had created mankind as "man and woman."

"He did not create a sexually neutral being, and the sexual distinction was willed by God."

**Beijing Sets Up More VD Wards**

*OW1104113089 Beijing XINHUA in English 0847  
GMT 11 Apr 89*

[Text] To provide greater facilities and better treatment for patients with venereal diseases (VD), hospitals in Beijing proper will add VD wards to their dermatological departments from mid-April.

As many doctors have only scanty knowledge of venereal diseases, some patients have not been able to receive effective and timely treatment. Now, however, doctors

in dermatological, gynaecological and obstetric, and urological departments will receive training in the diagnosis and treatment of the diseases

Doctors will maintain confidentiality of their patients.

In the past few years, the number of VD cases reported in China has risen significantly. In 1988, 56,090 extra cases were reported, and the number of patients increased by more than three times that of recent years.

## LAOS

### **Saravane Malaria Mortality, Lack of Funds**

*54004315 Vientiane PASASON in Lao 1 Apr 89 p 2*

[Text] For many years the people of Saravane Province have been severely afflicted with malaria. Saravane has become one of the south's premier malaria zones and also the province where the people are very superstitious.

The province can be divided into three malarial zones: The worst off are the districts of Ta-oi, Lao-ngam, and half of Saravane. Moderately severely affected are the districts of Toum Lan and the other half of Saravane. The area with a low incidence of malaria includes the districts of Vapi, Khong Sedone and Lakhon Pheng.

Dr Khamphou Phanakhon, chief of the province's malaria station told this reporter that Saravane is making really determined efforts to suppress malaria. Since 1987 they have been spraying DDT in Saravane and Lao-ngam districts while also distributing curative and preventive medicine to the residents of these two districts. On the average they get 6 tablets per person. For those districts where spraying has not yet taken place, the malaria station is distributing antimalarial tables to everybody. In addition to the spraying of DDT, antimalaria cadres are propagandizing the "three clean" principle. If the people act on this, it is said that it will help to protect against various diseases and works to steadily decrease their incidence.

By dint of these actual deeds in this effort, the effectiveness of countering the malaria threat is growing throughout Saravane Province. For example, in 1986 there were 3,312 hospital inpatients. Of those, 1,777 were malaria patients and 24 died of it. In 1987, there were 6,678 hospital inpatients of whom 734 had malaria and 18 died of it. In 1988 there were 8,383 hospital inpatients of whom 1,353 had malaria with 14 deaths from it.

The writer asked Dr Khamphou about measures taken by the provincial and central government authorities in this area and inquired as to his views on making this effort in Saravane more effective.

In the past, the province alone has organized a provincial-level committee to fight and suppress malaria. The province has also budgeted more than 10 million kip for the work. The central government has also devoted a fair amount of attention to it. In order to get good results in the future, it is desirable that cadres be trained specifically to deal with malaria. The reason for this is that currently there are only 8 medical cadres in the province. It is also desirable for the province and the central government to devote additional resources above and beyond funding: these would be primarily vehicles, propaganda materials, pictures, etc., which would be especially useful in improving this effort. However, this year there is still a problem: provincial authorities have only allotted 5 million kip for the work.

## MALAYSIA

### **Nine AIDS Carriers Identified In Past 10 Months**

*BK06050700 Kuala Lumpur BERNAMA in English  
0622 GMT 6 May 89*

[Text] Another nine carriers of Acquired Immune Deficiency Syndrome (AIDS), including the first woman, have been identified in Malaysia over the past 10 months, the Health Ministry reported Friday [5 May].

This brings to 28 the total number of people who have the virus, but show no signs or symptoms.

Fourteen of them are haemophiliacs believed to have been infected by blood products.

One of the four AIDS cases in the country had died since last July, bringing the number of fatalities to four.

## THAILAND

### **Over 500 People Test Positive for AIDS in North**

*BK14050550 Bangkok THE NATION in English  
14 May 89 pp 1, 2*

[Excerpts] Chiang Mai—More than 500 people have tested positive for AIDS in Chiang Mai, 80 percent of whom contracted the disease through heterosexual relations, raising concerns about prostitution and the promotion of tourism.

Provincial Public health statistics show 226 were female prostitutes, 229 are heterosexual men while only 59 are intravenous drug users and six were homosexual men.

The figures sharply contrast national statistics which showed 87 percent were intravenous drug users with only seven percent caught the disease through heterosexual relations.

Prime Minister Chatchai Chunnawan said the increasing AIDS problems in Thailand are "extremely worrying ramifications" for the country and suggested that the National Economic and Social Development Board conduct a study on AIDS and its connection with and impact on tourism during the Cabinet meeting yesterday. [passage omitted]

No comprehensive epidemiological survey of AIDS spread has been done in the North and much of the existing statistics on heterosexual men were obtained inadvertently by testing donated blood. [passage omitted]

**Number of AIDS Cases Reaches 20,000**

*BK13050740 Bangkok THE NATION in English  
13 May 89 p 1*

[Text] About 20,000 people in Thailand are carrying the AIDS virus with an increasing number of new-born babies contracting the virus from their mothers, a senior Bangkok Metropolitan Administration [BMA] doctor said yesterday.

The figure more than tripled the Public Health Ministry's recent report that there were about 6,000 AIDS carriers in Thailand.

Chief of the BMA's Drug Addiction Treatment Unit Dr Suphak Wanitseni said the latest number on AIDS carriers was based on a nationwide survey earlier this year.

According to the World Health Organization, there are almost 150,00 AIDS patients worldwide with five to 10 million virus carriers.

**VIETNAM**

**Spring Rice Crop Infestation, Preventive Measures Discussed**

*54004316 Hanoi HANOI MOI in Vietnamese  
24 Apr 89 p 3*

[Article: "Science Serving Production: Crop Infestation and Some Preventive Measures"]

[Text] The spring rice plantings are presently beginning their final stooling and emerging stages and the rice is maturing and developing well. Infestation from a number of early season insects and disease such as root suffocation, rice thrips, and grain-leaf flies has stopped. Many other dangerous pests are beginning to cause damage and will develop strongly by the end of the season. Brown planthoppers are occurring at a density of 50 per square meter in the 4-5 age group, similar to the same period during 1985, 1986, and 1988. From about 20 April to the beginning of May, many second hatch chaff leafhoppers will appear. In many localities, the density will reach a few thousand per square meter in

rice plantings heading from the end of April to the beginning of May. Rice blast has appeared in many local areas. This year, the CR203 rice and a number of other varieties susceptible to rice blast may be heading at the end of April and beginning of May, a time at which the weather is still suitable for tassel base blast to develop and cause damage to this rice planting, especially in those areas seriously affected by the disease during previous years. Green and black rice bugs have appeared in many locations on the young rice plants in densities of 20 to 30 per square meter. From the end of April, the plantings of extremely early heading rice will receive concentrated damage from rice mealy and green bugs, especially in Son Tay and the districts of Ba Vi, Thach That, Phuc Tho, Hoai Duc, etc. The first hatch of rice stem borer butterflies came out during March and their larvae are now occurring at a density of .1 to .4 per square meter in the 2 age group on the glutinous, NN8, etc., rice varieties. The density of insects and percentage of wilting is also similar to the same period of previous spring crops. A second hatch at high densities will cause serious damage to the late heading spring rice plantings after 20 or 25 May. Besides that, dry stripes disease has appeared and will develop at the end of the season. Rice leaf beetles have sporadically appeared in a number of locations (Gia Lam, Dong Anh). Rice silver leaf disease and rice caseworms will also appear in the near future.

Therefore, local areas must immediately supervise and guide the cooperatives and people in inspecting each piece of land on a regular basis from now until the end of the season to discover outbreaks of dangerous infestation, to promptly contain and eliminate them, and to prevent them from spreading. At the same time, it is necessary to properly implement comprehensive preventative measures, and to tend and fertilize with precise techniques. In fields of good rice with sufficient nitrate fertilizer applied, especially those with traces of dry stripes disease, blast, etc., application of additional nitrate fertilizer must be halted and sufficient water maintained until the end of the season. Pick withered leaves caused by stem borers, net and eliminate ground beetles and butterflies of all kinds, etc. Use Kitazin and Fujione to eliminate rice leaf blast, Hinosan for tassel base blast, and Validacin for dry stripes disease, various kinds of organic phosphorous, carbonate, and organic chlorine insecticides to eliminate stem borers, caseworms, leaf beetles, mealy bugs, brown planthoppers, etc.

## ARGENTINA

### 150,000 AIDS Cases Estimated in 1991

#### Rise Chronicled

54002036 Buenos Aires CLARIN in Spanish  
9 Apr 89 pp 8-9

[Article by Mario Rodriguez Munoz: "AIDS in Argentina Today"]

[Text] The number of AIDS patients is multiplying year after year in our country, as in the rest of the world. In 1988 there was a total of 315 cases in Argentina, whereas the estimate for 1993 is 16,000 patients, and experience shows that these projections (at least until a cure for the disease is found) are 95 percent accurate. Another item: estimates are that for each AIDS patient there are between 50 and 100 people infected, and thus there are presumably between 30,000 and 50,000 asymptomatic carriers. By 1991 150,000 people will presumably be infected.

The annual increase in the disease places Argentina "among the countries with the fastest growth," according to a report from the Ministry of Health and Social Action, which adds that "our country is in ninth place in the Americas," the continent with the highest indices of AIDS.

"What we are currently seeing," explains Dr Laura Astarloa, the chief of Infectious Diseases Division B at Muniz Hospital, "is that most AIDS cases are appearing among intravenous drug addicts. The first cases that arose here were homosexuals who had contracted it outside the country, whereas now most of the infections occur in Argentina. The disease then emerged among intravenous drug addicts. Although it still predominates among homosexuals, the study of carriers indicates that the trend in this group is leveling off while it is on the rise among drug addicts."

For her part, Dr Maria Estela Estevez, a CONICET [National Council for Scientific and Technological Research] researcher who is a specialist in AIDS, says that "it is difficult to know accurately the number of patients in our country. What is obvious is that we have one of the highest growth percentages in Latin America, and we can see that the disease is spreading to groups in which it previously did not exist, such as women and heterosexuals."

"In any event," Dr Estevez adds, "I think that it is premature to speak of a decline among homosexuals. We do have to acknowledge that this group has become aware and is taking more precautions than others."

"Based on the data that we have," explains Dr Mario Ambrona, the head of the National Program for ETS [sexually transmitted diseases] and AIDS, "the problem has stabilized among homosexuals and is on the increase among drug addicts. The average age of patients is 32 or 33 and falling. During the first 3 years after AIDS appeared, there

were no autochthonous patients, those who had become infected inside the country, but last year 16 percent were autochthonous cases, and in the first quarter of 1989 it was 38 percent. The disease is now in Argentina."

As far as Dr Pedro Cahn, the head of the Infectious Diseases Department at Fernandez Hospital, is concerned, "these figures are just the tip of the iceberg."

#### Women and Small Children With AIDS

"More and more we are seeing infected women who are either drug addicts or the partners of bisexual, drug addicted or hemophiliac men. Whereas before 90 percent of the patients who came to the clinic were men, mostly homosexuals, today 60 percent are men and 40 percent are women," Cahn notes.

Fernandez Hospital is one of the few, if not the only one, that cares for pregnant women who are carriers of the virus. "As of November 1988 we had had 19 births, 17 drug addicted women and 2 drug addicted couples. Seventeen of the babies tested positive at birth (the tests detected AIDS antibodies); one we lost track of, and the other was negative at first and then positive. Three of them who were born with antibodies became negative at months 8, 5 and 16," this specialist states.

According to international estimates, half of the babies born to mothers who carry the virus are infected. But it cannot be confirmed whether they are carriers or not until 15 months after birth.

#### The Costs of the Disease

The average life span of a person from the time that the disease is confirmed is 1 to 2 years. "During this time he will have opportunistic infections, germs that usually do not harm an immunologically sound individual. These patients are hospitalized and treated for serious infections. They also get tumors on the skin and in the lymph nodes. Skin tumors, Kaposi's sarcoma, are not common in our country, as in the United States. Opportunistic infections like pneumonia are more common here. We do not treat AIDS. AZT is not an authorized drug in Argentina."

Dr Estevez clarifies, however, that "new drugs are tested here that are in experimental protocols, but our group (which works in CIMAE [expansion not provided], is now seeking more accurate diagnostic techniques."

If the initial test is negative, there are no problems, except that a person may not test serum-positive until 6 months after the virus enters the organism, which means that one or two more tests must be conducted subsequently. In the event that a person tests positive, other tests are conducted to confirm this, inasmuch as it is likely a false positive.

"The cost is about \$100 per patient per day of hospitalization," notes Dr Astarloa, "and the average stay of each patient is 10 days for each infection. Patients may be hospitalized 4 to 6 times a year, 12 or so in 2 years. And this is aside from treatment in outpatient clinics and laboratory work."

The estimates in the province of Buenos Aires are between \$20,000 and \$40,000 a person per year, not counting the use of antiviral drugs like AZT. In the United States the numbers are between \$150,000 and \$200,000 per patient.

For example, a confirmation test (which is conducted if the initial one is positive) costs \$50 per sample. "In Muniz Hospital these tests are free unless the patient has social benefits, but it is unlikely that the insurer will agree to pay," the doctor said. A jar of 100 AZT tablets, which is a little more than an 8-day supply for an adult, costs \$190 in the United States.

Dr Ambrona notes that "both here and in the developed countries there is a move towards caring for the patient at home. The patient is hospitalized only when he needs complex exams or is terminal. Costs are thus cut, and this is being done all over the world. Budgets are too small. Social benefits as of this year cover testing of all blood donors. Forty-five percent of the banks in the country test themselves."

#### Drug Addicts

Some addicts are careful and sterilize needles and syringes, "but by the third dose this no longer matters," some of these patients explained to Dr Astarloa. "Drug addicts in Argentina," the physician adds, "shoot up in a group, a custom that is not found in other countries, and share their dose, which is passed from one to another. The virus thus spreads easily. And this affects all social strata."

"Drug addicts predominate in the current patient population (60 percent men, 40 percent women)," Dr Cahn indicates. "Of those tested, 21 percent of the homosexuals are infected (1 in 5); among drug addicts it is 42 percent, twice as many. Moreover, the drug addicts who come and see us are the ones who are in better shape, the ones who come from the National Center for Social Reeducation or other similar institutions. But what about the ones who shoot up under highway overpasses? I think that the percentage is higher there."

#### Health Minister's Remarks

54002036 Buenos Aires CLARIN in Spanish  
9 Apr 89 p 9

[Text] The minister of health and social action, Dr Ricardo Barrios Arrechea, explained to CLARIN that the National Commission for the Struggle Against AIDS, which was created by presidential decree last month, "was set up to bolster the national program that has been

in operation since 1987. The governmental and nongovernmental agencies that join this commission will have the broadest participation in it."

He indicated that AIDS "is a problem that society as a whole must take up. This disease is doubling year after year, which is more than worrisome. Here we have to attend to two serious developments. On the one hand, people are acquiring the disease at a younger and younger age; on the other, those infected through drug addiction are equaling the number of homosexual patients, which was initially higher."

"Of course the behavior of the two groups is different," Barrios Arrechea added, "inasmuch as homosexuals are changing their habits, which could mean that the disease may not spread, whereas this is not happening among drug addicts because of their implicit self-destructive tendency."

#### Importance

The minister emphasized that "the importance that is attached to this issue is fundamental, because of the characteristics of the disease. There is more concern and awareness of the disease than potential for translating this into budgetary funding. AIDS is a new disease that is competing with old ones that also have to be treated, but among the new ones it is one of the most important."

#### More Recent Cases

54002036 Buenos Aires CLARIN in Spanish  
9 Apr 89 p 9

[Text] Figures, Zones, Symptoms

According to the figures furnished by the Health and Social Action Ministry's National Program for the Control of Sexually Transmitted Diseases and AIDS, the total number of recorded AIDS patients as of 31 December 1988 was 315. From then until 31 March of this year there have been 41 more cases.

Of these 315 patients 306 are men and 9 are women, and their average age is 33.8 (the range is from 7 months to 76 years). Of the total 151 have died, 148 males and 3 females.

#### Details

The breakdown by sexual habits is as follows: 63 heterosexuals, 181 homosexuals and 71 bisexuals. Ninety-eight people became infected in our country; 66 in the United States; 52 in Brazil; 13 in the United States or Europe; 5 in the United States or Brazil; 28 in Europe; 2 in Canada; 4 in Brazil or the United States or Europe; 2 in Europe or Africa; 1 in Africa; 10 in Europe or Brazil; 3 in miscellaneous countries; 29 somewhere unknown, and others, 1.

Another breakdown of the patients showed: 4 homosexual-intravenous (IV) drug addicts; 13 bisexual IV drug addicts; 33 IV drug addicts; 13 hemophiliacs and 1 newborn.

As far as preliminary symptoms are concerned, 276 had fevers; 250, loss of weight; 221, lymph gland abnormalities, and 134, diarrhea.

The breakdown of cases by year shows 3 in 1982; 4 in 1983; 6 in 1984; 29 in 1985; 27 in 1986; 72 in 1987 and 174 in 1988. By 1993 estimates are that there will be 16,000 patients throughout the country.

As for serum-positive individuals (that is to say, patients who are infected although the disease has not developed), the figures show that 1.1 of every 1,000 blood donors is a carrier; 21.2 percent of homosexuals; 29.8 percent of IV drug addicts; 1 percent of prostitutes and 9 percent of hemophiliacs.

### Regions

When the Undersecretariat of Social Medicine of the Province of Buenos Aires made public the AIDS cases that had been reported to it within its jurisdiction, the number of carriers and patients from Medical Region VIII, whose seat is Mar del Plata, was striking: 356 asymptomatic carriers and 11 patients, of a total of 574 infected persons and 38 patients for the entire province.

The head of the undersecretariat, Dr Matilde Menendez, explained to CLARIN that "the gap between this and other regions reflects the number of official notifications. This is the first provincial-level program for the prevention and control of HIV infection; it was started late last year. And it is there, in Medical Region VIII, that the most work has been done so far and, therefore, from which most notifications have come because there is more awareness."

### Ranking

The regions with the most cases are: V, whose seat is San Isidro, with 91 infected persons and 10 patients; XI, with its seat in La Plata, 71 carriers and 16 patients, and VI, whose seat is in Lomas de Zamora, with 50 carriers.

"Notification of this disease, as with all sexually transmissible diseases, is obligatory. But there is very heavy undernotification because people do not report it," she adds. "For example, in La Matanza, Region VIII, apparently there are no cases, but this is not possible; there must be some carriers. The problem is that they do not report. The best reporting is where the best work has been done."

Dr Menendez emphasized that "of every 1,000 persons in the province of Buenos Aires, 1.25 are infected. A major source of infection is intravenous drug addiction, in 80 or 90 percent of the cases studied. Therefore, prevention of drug addiction is fundamental."

## BRAZIL

### AIDS Spread in Sao Paulo Slower Than Forecast *54002037a Sao Paulo O ESTADO DE SAO PAULO in Portuguese 12 Apr 89 p 10*

[Text] The Health Secretariat reported yesterday that 1,585 new cases of AIDS were registered in 1988 in Sao Paulo State, 407 more cases than in the previous year, which means a 42-percent increase in the disease—much smaller than expected. Secretary Jose Aristodemo Pinotti said it had been expected that the number of cases would double, which was not the case. "The disease is spreading less because there has been a great improvement in the quality of blood used in transfusions, which is now well controlled."

The secretary also surmises that there has been a change in the behavior of the homosexual group. He noted that, in the United States, homosexuals have become more cautious, which has reduced the level of infection in this group. In Sao Paulo, data from the secretariat indicated that 488 new cases of infection were recorded among homosexuals in 1987 and last year there was only a slight increase, to 493 cases.

On the other hand, there has been an explosive increase in infection among drug addicts, because the same needle is used by several people. In 1986, this factor was considered responsible for 30 cases. In 1987, the figure reached 169 and last year 168 such cases were recorded. It is predicted that this year the number of AIDS cases among addicts will far surpass recorded cases of the disease among homosexuals.

Although these data confirm trends, they are not yet considered definitive. Problems of computation, which should be solved this week, have made it difficult to draw up complete tables by region in the state.

### Meningitis on Rise in Rio de Janeiro *54002037c Rio de Janeiro O GLOBO in Portuguese 13 Apr 89 p 11*

[Text] At the Sao Sebastiao State Institute of Infectious Diseases, admissions of meningitis patients, which have averaged 4 per day, rose to 18 yesterday, but there was only one case of meningococci meningitis, the most serious form of the disease. The cases were registered in 13 locales of Greater Rio de Janeiro and, according to the Public Health Superintendency of Diseases, the fact that the cases are scattered generally rules out the possibility of an epidemic outbreak, although the number of cases is considered exceptional. The patients range from 3 months to 45 years of age.

Sergio Wilson Nobrega, director of the institute, explained that viral meningitis is a benign pathology and much less serious than bacterial (such as meningococcal) or fungal meningitis. He stressed that most cases are cured and noted that the treatment period does not exceed 10 days. The symptoms of viral meningitis are undramatic—mild fever, headache and stiff neck—rarely severe enough to alter the level of consciousness of the patient. The contagion is air-borne.

The institute will isolate the virus; but, Sergio Nobrega adds, it may be the same one that causes parotitis, known as mumps. According to Nobrega, this virus attacks the parotid glands, but can also attack the meninges.

The interned patients reside in Jardim Gramacho, Caju, Bonsucesso, Santa Teresa, Ilha do Governador, Santissimo, Cabucu, Comendador Soares, Tijuca, and Lins. Two patients come from Queimados, two from Santa Cruz, and three from Duque de Caxias.

Nobrega said the daily average of admissions of viral meningitis patients is typical of endemic cases. He preferred not to comment on the significant increase registered between 1900 hours on Tuesday and 0700 hours yesterday, and said it is the job of the Public Health Superintendency of Diseases to analyze the higher incidence observed between day before yesterday and yesterday.

According to Sergio Nobrega, the institute—the unit of referral for infectious diseases in the state—has the capacity to admit more than the average number of patients. There are 70 beds available and 14 more can be put in service if needed.

Diana de Carvalho, public health superintendent of diseases, is waiting for the report from the institute before analyzing the increase in cases. According to the State Secretariat of Health, the incidence of the disease has been declining. In 1987, there were 1,908 cases (434 of which were meningococcal), with 587 deaths; 1,759 cases were registered in 1988 (425 of which were meningococcal), with 349 deaths.

**Health Minister Sees Polio Controlled by 1990**  
*54002037b Brasilia CORREIA BRAZILIENSE*  
*in Portuguese 9 Apr 89 p 15*

By next year, poliomyelitis will be under control in Brazil. The assurance was offered yesterday in this capital by Health Minister Seigo Tsuzuki, who was in Piaui to officially open the first phase of the Northeastern Vaccination Campaign against infantile paralysis, programmed to immunize 6.3 million children from 0 to 5 years of age in the nine states in the region.

According to the health minister, the vaccination campaigns against polio have shown good results, but the disease has not yet been eradicated and some states have

been losing ground. The major foci of infantile paralysis are in the northeast, which has not succeeded in meeting the planned goals for vaccination coverage, primarily because access to the rural zone is difficult.

"Piaui was one of the states with unsatisfactory vaccination results," the minister stressed, adding that regional vaccination is efficient and will be complemented by a nationwide campaign, on a date to be scheduled. The minister noted that even if the disease is under control by 1990, the government will not relax its efforts.

"We are going to maintain permanent and continuous epidemiological vigilance," he assured, after he had administered the first dose of Sabin vaccine to Francisco Clayton da Silva, aged 3, at the health unit of Dirceu Arcoverde District, one of the most populous in Teresina.

**Rain**

The heavy rains which fell throughout the coastal area and various other regions of Paraiba State made it difficult for the residents to reach the vaccination posts, frustrating the expectations of the Health Ministry, which had hoped to vaccinate 480,000 children yesterday in Paraiba. This figure represents 90 percent of the infant population from 0 to 5 years of age.

In Paraiba alone, 11 cases of the disease were registered last year and 6 cases were reported in the first 3 months of this year.

"Unfortunately, the rate of vaccination coverage in Paraiba has not yet reached 50 percent and this is cause for concern," lamented Health Minister Tsuzuki, who was in Paraiba to inaugurate the Northeastern Day Against Poliomyelitis.

Tsuzuki is troubled by the polio situation in the northeast, where 77 cases were registered in 1988. He explained that the resurgence of polio in the region is precisely because of the poor vaccination coverage achieved in the most recent campaigns. "In the south, the disease is under control, because the people take their children to be vaccinated. In the northeast, unfortunately, no campaign has achieved 90-percent coverage," he said, comparing the two regions.

In Sergipe State, Governor Antonio Carlos Valaradares (PFL [Liberal Front Party]) yesterday opened the Northeastern Vaccination Campaign against polio in that state, at a health post in Santos Dumont District, on the outskirts of the [?capital]. The vaccinations went on until 1700 hours. Despite the persistent rain which fell during the morning, Health Secretary Gilton Resende said the coverage was satisfactory. Throughout the state, 8,000 people were mobilized to work all day yesterday on the vaccination campaign, the goal of which was to immunize 222,000 children.

## KUWAIT

### Strategy for Combating AIDS Described

54004526 Kuwait AL-WATAN in Arabic  
11 Mar 89 p 13

[Article by Health Affairs Editor: "Kuwait Awakens Slowly to Threat of AIDS; Dr Bahbahani Tells AL-WATAN, 'We Know of 26 Cases Involving People Carrying the Virus; Number of Such People To Increase in Future; We Have Law To Protect AIDS Patients, Safeguard Their Financial and Social Rights; Examining Everyone in Population Not Practical; We Sent Physician, Nurse to Australia To Receive Training in Care of AIDS Patients'"]

[Text] Cracks are forming in the wall of silence facing the World Health Organization [WHO] in its fight against AIDS, Acquired Immune Deficiency Syndrome, in the Middle East. The presence of AIDS cases in the Islamic world, a world that is characterized by its piety and conservative attitudes, has been recognized.

And yet, concern about AIDS is growing, and many countries are taking measures against it as more information about the disease surfaces. We know now that there are 140,000 cases of AIDS in the world. The WHO estimates that between 5 and 10 million persons are carrying the AIDS virus.

Dr Kazim Bahbahani, assistant director for research at Kuwait University, coordinator of the National Anti-AIDS Committee, and chairman of the Scientific Specialists Committee, told AL-WATAN that official reluctance to reveal information about AIDS cases to WHO must end after it became evident that homosexuality, which is forbidden in Islam, was not the principal cause of the disease in the area. This is especially important when we learn that blood transfusions and using needles that are not sterile are major causes of the danger of contracting the disease.

### The AIDS Problem in Kuwait

Dr Kazim Bahbahani spoke about the extent of the AIDS problem in Kuwait. He said that the National Anti-AIDS Committee had come up with a plan of action which included examining the blood bank, testing blood donors and banning blood which is imported from abroad. That is considered one of the ways by means of which the disease is transmitted. Another is using disposable needles [as published] and throwing them in the garbage. Another problem is that of sex and sexual practices that are abnormal and unacceptable; they could cause the deadly disease. To check this problem we have been pursuing a health awareness and an Islamic awareness policy, and we have been giving people advice and offering them guidance.

### There Is a Law, But...

Dr Bahbahani revealed that there was a new law to deal with carriers of the AIDS virus. In addition, numerous measures have been taken to protect society from those carrying the virus. Dr Bahbahani said, "We have not yet completed our study of this law in which we took into consideration the freedom of society and the freedom of an individual carrying the virus. We also took into consideration that individual's financial, social, developmental, educational and legal rights." Dr Bahbahani added, "Why do we treat AIDS patients like criminals, accused of contracting the virus? The problem now lies in the magnitude of this disease worldwide. We have to figure out what is new about this disease and what are its accompanying social effects. At the same time, each society has its own customs, traditions and modes of conduct. It would be difficult to enact a law in Kuwait because of differences in social mores, customs and traditions."

Dr Bahbahani said, "Dealing with people carrying the virus and with their freedom and their rights is a bigger problem than that of dealing with the disease itself. I can say, however, that the law is still under consideration."

### No to Isolation

Dr Bahbahani strongly opposed isolating carriers of the virus. He said that he does not support isolating them or quarantining them. He said that measures which were taken regarding Kuwaiti citizens carrying the virus did not go beyond letting them know the danger of their illness.

### An Appeal for Attention

Dr Bahbahani revealed that the Ministry of Public Health had sent a physician and a nurse to Australia to attend a training course on assisting and treating AIDS patients. He said there were no AIDS patients in Kuwait, but that there were people carrying the virus.

### The Language of Figures

Dr Bahbahani indicated that the number of patients carrying the AIDS virus in Kuwait was 26. He said that was a small number relative to Kuwait's population. He said that statistics, figures and available data indicate that the number of present cases is relatively small. He attributed that to the fact that the virus came into the area at a later date, compared to other areas of the world.

### Not Scientific and Not Useful

Dr Bahbahani ruled out the possibility of examining everyone in Kuwait's population to discover who is carrying the virus for the disease. He said "That measure cannot be taken because it is not scientific, and it would not be useful."

Dr Bahbahani spoke about the magnitude of the problem in the next 5 to 10 years, and he said, "If we think—and the National Anti-AIDS Committee has—about what will happen in Kuwait in 5 or 10 years with this disease, [we realize that] we have no vaccine or AIDS treatment centers. When we compare ourselves with the remaining countries of the world where the disease has spread, statistics tell us that the number of AIDS cases in Kuwait will double in 6 to 12 months. Then we find out there are four Kuwaiti citizens—one of them is a little girl—who have AIDS." Dr Bahbahani said that after the body is infected with the AIDS virus, a person may carry the virus from 6 months to 5 years, the incubation period.

He may have no symptoms during that time. And yet, 30 percent of those carrying the virus could have some symptoms. Two years after the symptoms appear, a patient dies. The percentage of people carrying the virus who have symptoms could exceed 30 percent as time goes by.

#### **Distinguished Centers**

Dr Bahbahani reminded us that the WHO had chosen Kuwait to serve as a center assisting the organization in its efforts to discover AIDS in the East Mediterranean. He said that Kuwait had distinguished centers.

## CANADA

### **Incidence of Childhood Leukemia in Kamloops Under Study**

54200048 Ottawa THE OTTAWA CITIZEN in English  
1 Apr 89 p H11

[Text] A study into the incidence of childhood leukemia in this city in the interior of British Columbia city now has moved into its second phase.

Epidemiologist Michele Descamps of the Cancer Control Agency of British Columbia arrived in Kamloops this week to start conducting extensive interviews with 30 families who were picked at random from the community.

The agency agreed to conduct a study last fall after discovering that Kamloops had twice the incidence of childhood leukemia as other parts of the province.

There are an average of two cases a year in Kamloops.

Interviews were completed two weeks ago with 14 current and former Kamloops families whose children were diagnosed with leukemia while living here from 1975.

The 30 other families to be interviewed have only one thing in common—children of the same age and sex as the leukemia victims.

The questions focus on environment, exposure to specific substances, and occupation of the parents dating back to a year before the child's birth.

### **Study Shows Food Poisoning Affects 2 Million a Year**

54200047 Ottawa THE OTTAWA CITIZEN in English  
31 Mar 89 p A16

[Text] More than two million Canadians are victims of food poisoning each year and the numbers are rising.

So says a study conducted for the federal Department of Health and Welfare.

Food poisoning is rarely fatal. The study estimates about 31 deaths in Canada each year.

The study suggests that food-borne illness costs the country \$1.3 billion annually in medical care losses suffered by food producers and retailers and other costs.

The main bacterial cause of food poisoning is salmonellosis, which is commonly found in uncooked meats.

"Salmonella, if anything, is increasing, it's not decreasing," said Dr Ewen Todd, author of the report and head of the contaminated food section in the federal bureau of microbial hazards.

The study, "Preliminary Estimates of Costs of Food-borne Disease in Canada and Costs to Reduce Salmonellosis," was obtained under the Access to Information Act by Ken Rubin Consulting Services.

"Food-borne disease is clearly much more extensive than has been previously thought and contributes significantly to illness in Canada and elsewhere," Todd writes in the study, which will be published soon.

"Its costs are high, high enough to consider a national effort in preventing some of the factors that cause the disease from occurring."

The study says the most effective way to reduce the incidence of the illness is to reach people about its hazards.

About two percent of its victims go on to develop seemingly unrelated illnesses like arthritis, cardiac problems, intolerance to lactose and milk protein, chronic diarrhea and food allergies, Todd said.

### **Number of Red Measles Cases in Outaouais Reaches 26**

54200049 Ottawa THE OTTAWA CITIZEN in English  
6 Apr 89 p B3

[Text] The number of red measles cases in the Outaouais has reached 26, health officials said Wednesday. Outaouais Community Health Department spokesman Rene Marcotte said two new cases were reported in Aylmer Tuesday and two in Gatineau. He said the infection continues to [be] based in Buckingham because the new children had contact with children here. Twenty-one of the 26 cases have been linked to Buckingham. Officials are continuing to comb through child medical records to find children who have not been vaccinated.

## DENMARK

### **Prosecutor to Seek Indictment of Company in HIV Blood Case**

54002486a Copenhagen BERLINGSKE TIDENDE  
in Danish 14 Apr 89 p 1

[Article by Anders Wiig: "Company Held Accountable for Untested Blood"; first paragraph is BERLINGSKE TIDENDE introduction]

[Text] After lengthy investigations the public prosecutor is now prosecuting Nordisk Gentofte for things that were criticized in the judicial report on the use of donated blood that had not been tested for AIDS.

The Gentofte police commissioner is now prosecuting the Nordisk Gentofte drug plant for five violations of laws relating to medicine.

The plant has already been sharply criticized in the judicial investigation of the use of unscreened donated blood—the so-called AIDS affair. Following a lengthy police investigation of complaints against the firm Public Prosecutor Asbjorn Jensen has advised Police Commissioner Ole Stevns to take the case to court.

The indictment that is now being written generally follows the five charges the public prosecutor asked the police to investigate in July. The firm is charged with having used previously produced preparations for hemophiliacs after 1 January 1986 in violation of the Health Administration's interim arrangement for the use of preparations that had not been HIV tested (tested for the presence of antibodies that reveal a possible danger of AIDS infection).

In addition the firm sold Nordimun after 1 January 1986, basing production of the drug on untested blood plasma that was collected as far back as 1983. The firm is also being prosecuted for basing production of albumin preparations during the period 1 January 1986-11 November 1987 on blood plasma that was collected in 1980-85—and had not been tested for HIV. Finally the prosecution says Nordisk Gentofte moved too slowly in pulling medicine for hemophiliacs off the market in accordance with the Health Administration's 1987 order and that the firm supplied medicine with "misleading product information."

Notes enclosed in packages of factor preparations, which are vital for hemophiliac patients, erroneously stated that the medicine had been tested for HIV.

The firm has long since admitted to the last charge, describing it as a regrettable packaging error. In general Nordisk Gentofte acknowledges most of the purely factual conditions on which the indictment is based, according to Detective Superintendent K.I. Larsen. But the firm and its defense attorney, Mogens Gaarden, deny that any really criminal or culpable acts occurred.

There was only one court meeting during the investigation at which the police commissioner requested superior court judge Niels Johan Petersen's material. But Nordisk Gentofte expressed an unqualified desire to cooperate in clearing things up, so it was not necessary to ask for a court order to get the documents turned over.

The charges against the company will include violations of the medicine act and the Health Administration's directive on the production, control, storage and sale of medicine. A fine will be called for, but BERLINGSKE TIDENDE has been informed that there are no plans to ask for the confiscation of the firm's profits from the sale of illegal products.

## SWEDEN

### Official Warns of Continuing AIDS Threat

#### Warns of Complacency

54002483 Stockholm DAGENS NYHETER in Swedish  
3 Apr 89 p 24

Article: "The AIDS Danger Is Not Over"; first paragraph is DAGENS NYHETER introduction]

[Text] The AIDS threat is definitely not over in Sweden. During the nineties, we must be prepared for significantly more HIV and AIDS patients, Professor Robert Olin of the Social Welfare Board warned.

False security and perhaps even indifference are spreading. HIV and AIDS were not so terrible in Sweden, according to popular belief. The researchers exaggerated their estimates of the number that would be infected and later develop AIDS.

In 1986 they spoke of 10,000 infected with the virus, including unknown cases—the so-called dark number. One year later the number was estimated at 5,000. Now, in the spring of 1989, the figure is 3,000.

By last February, the State Bacteriological Laboratory (SBL) had received reports of 2,039 cases of HIV infection. The number of unknown cases is estimated at about 1,000.

"Today's estimate of the 'dark number' is much more realistic than previous estimates," said Robert Olin, head of the AIDS office at the Social Welfare Board.

#### Absurd Thought

"But it is absurd to believe that the HIV infection will die out on its own during the nineties. As long as we have no vaccines or medicines that work, we must learn to live with HIV and AIDS."

The number of unknown cases among homosexual and bisexual men is estimated at 400-600 persons. There may be 50-100 undiscovered cases among those who have been infected through blood products.

Intravenous drug users form the high-risk group that has been tested most often. Throughout Sweden, there are no more than about 50 unknown drug users who have been infected, according to Olin.

But even though researchers believe they have a good understanding of the extent of infection today, there is still much uncertainty concerning the future.

The varying degree of contagion is of great importance for the trend during the nineties. Virus researchers now agree that the number of viruses, and thus the degree of contagion, is greatest among people recently infected and

among those who are beginning to have symptoms of AIDS. The disease is far less contagious during the long incubation period of 5-15 years.

Most of those infected in Sweden are in this incubation phase. In the early eighties, the virus entered homosexual and bisexual men. It spread most rapidly among intravenous drug users from 1983 to 1985.

"We are now pausing to catch our breath. Now is the time for us to make long-term plans to prevent further spread of the infection," Robert Olin said.

#### **Sudden Explosion**

Researchers in both Sweden and other countries are working to produce models for reliably predicting the future spread of the infection. Marten Lagergren of the Karolinska Institute, is one of these researchers. His model shows that the infection can continue to spread, even if fewer and fewer people maintain a high-risk lifestyle. In this case, HIV would spread slowly for many years, and then suddenly explode.

"It is a matter of an almost incomprehensibly long period of time," Olin said.

He is afraid that the politicians will misinterpret the situation and not look far enough into the future. They may be tempted to shift resources from HIV and AIDS to other problem areas in health care.

#### **First 'Sex Tourism' Cases**

54002483 Stockholm DAGENS NYHETER in Swedish  
23 Mar 89 p 6

[Unattributed report: "HIV Infected On 'Sex Trip'"]

[Text] Swedish men have been infected with the HIV virus in Bangkok. The first cases were discovered recently.

The stream of Swedish tourists to Thailand is increasing dramatically. In 1986, 25,000 people traveled there, while last year the figure was 40,000. Ordinary travel agencies book trips to Thailand, but so do "sex tourism" agencies, which advertise for customers in men's magazines.

"It is not only men on sex trips who place themselves at a high risk. We must also warn young people and others who stop over in Bangkok on their way to Australia," Doctor Johan Wallin of the AIDS delegation said.

#### **Few Infants Born Infected**

54002483 Stockholm DAGENS NYHETER in Swedish  
29 Mar 89 p 7

[Article by Sigrid Boe: "More And More Children Infected With HIV"]

[Text] Newborn babies are the latest high-risk group in the AIDS epidemic. In New York, at least one out of 77 pregnant women is now infected with the HIV virus. Last year, almost 2,000 babies were born there by HIV-positive mothers. Of these babies, at least 700 will be affected by the infection themselves and, eventually, they will become AIDS victims.

"These are extremely high figures. Here in Sweden, tests among pregnant women so far have shown that fewer than one out of every thousand pregnant women is infected," said Professor Hans Wixell, director of the State Bacteriological Laboratory (SBL).

In the state of New York, blood samples from practically all newborn babies, 99 percent or a total of almost 300,000 babies, were analyzed from November 1987 to the same month in 1988.

#### **Via Placenta**

This study showed that almost 2,000 of the babies had antibodies against HIV in their blood. The antibodies pass through the placenta from the HIV-infected mother over into the child. According to experts, at least 40 percent of the children will be infected with HIV and they will probably develop AIDS. This applies to more than 700 of the children born last year.

This is considerably more than previously reported in the state of New York. Throughout all of 1987, 117 cases of AIDS among children infected in the womb were discovered. So far, a total of 422 such cases have been reported.

According to the study, which is presented in the latest issue of the American medical journal JAMA, the HIV virus is more widespread in New York City than in the outlying regions. Most of the HIV-infected mothers were found in areas that are well known for their high incidence of IV drug abuse.

Thus, the researchers concluded that IV drug abuse and sexual contact with IV drug users are the greatest causes of HIV infection among women of child-bearing age.

#### **Greater Risk**

The greatest number of HIV-positive women were between 30 and 39 years of age. The researchers believe that one reason for this is that older women have been using drugs for a longer time, so that there is a greater risk that they have been infected.

"What the study clearly shows is that there has been a definite stratification of the HIV infection among various social groups. It is increasing most rapidly among drug users and the poor. The number of HIV positive results is considerably higher in the slums of New York that are populated by Blacks and Spanish-speaking people," Hans Wixell said.

### **Young Homosexual Men Vulnerable**

54002483 *Stockholm DAGENS NYHETER* in Swedish  
12 Mar 89 p 16

[Article by Kerstin Vinterhed: "AIDS Campaign Not Getting Across"]

[Text] The decreasing number of HIV and AIDS victims is now being debated. But in one group, young homosexual men, the number of people being infected is not on the decline. Information from AIDS campaigns is not reaching this group, according to critics at RFSL [Royal Swedish Research Laboratory], the National Association for Sexual Equality. They believe that the information is too didactic for the message to get across.

The information lacks warmth, humor, generosity, pleasure, and sexuality. It is too moralizing and didactic. The information is both dehomosexualized and desexualized.

This broadside against the Swedish AIDS campaign was delivered recently in Stockholm, when RFSL organized a hearing with about 50 of the nation's leading experts on AIDS, plus several Norwegian guests. They discussed the AIDS and HIV situation.

An analysis of the figures from the State Bacteriological Laboratory shows that the number of newly discovered HIV-positive homosexual and bisexual men under 30 has not declined, as it has among older members of these groups. The statistics do not always reflect the present spread of the infection, since the diagnosis often occurs long after the infection and there is a certain delay before it is reported to SBL.

### **Disregard Safety**

Still, it is possible to find out if certain persons have been recently infected, if they previously tested negative (within 1 year). This was the case last year among five persons in Malmo, seven in Goteborg, and nine in Stockholm. All of these people had previously tested negative. Of the nine persons infected in Stockholm, all were young men who had had anal intercourse.

Both RFSL and the experts believe that the paths of infection are well known to these people. How is it, then, that new victims are being infected? The following reasons were listed at the hearing:

Certain people consciously disregard safe sexual practices, even if they themselves have the HIV virus.

Certain people believe they can tell by looking at a person if he is infected.

They also believe that certain professional categories, such as health care workers, cannot be infected.

Certain men who have steady relationships have casual intercourse with other men. They do not always have safe sex.

### **Alcohol**

When partners practice safe sex in a steady relationship for a time, they sometimes stop doing so. The result may be infection.

Alcohol is an important "co-factor," especially during vacations abroad.

Young homosexuals often fall into unsafe situations, partly because they are uncertain of themselves and partly because they may give in easily to an older partner who wants to practice unsafe sex.

Self-contempt sometimes leads to taking greater risks.

Some uninfected men who have gotten by for a long time may stop practicing safe sex.

If HIV-positive results are kept secret, a dangerous underestimate of the risk of infection may spread.

A lack of encouragement after a change in sexual habits may result in a return to unsafe sex.

There is a serious problem behind this long list. Information and propaganda from RFSL reaches only its own members, but how do you reach men who have sex with men who do not identify themselves as homosexuals? How do you reach young people who are having their first experiences and who have not yet developed their homosexual identity? How, in short, does your information reach those who do not want it?

RFSL leaders do not have an answer to that question, but they explain that, from their own experience, they know that one must have self-acceptance before he will accept any information at all.

Being made invisible, having society disapprove of their sexuality, and lacking role models makes it difficult for many homosexuals to come to terms with themselves. They conceal their "preference" from others and hardly admit it to themselves. With regard to infection, it is precisely this group that is most vulnerable and that also poses a threat to others. RFSL's main criticism of the AIDS campaign is that the campaign ignores this fact.

What, then, is the situation in general with regard to the spread of HIV? The infection is decreasing in all groups, according to figures from SBL. The increase in December 1988 was primarily a "bookkeeping effect."

**Just Over 2,000**

In June 1986, 1,057 persons had been infected, while at the end of January 1989 (the most recent available figures) the number was 2,015. This means that the number doubled in 2.5 years, compared to a doubling rate of 6 months, which was previously feared. As usual, among high-risk groups the increase is greatest among bisexual men. The group of those infected by blood transfusion is "closed," with no more cases being added. The group of drug abusers is steadily declining, although both underreporting and suicide may be feared. Among

heterosexuals who have been infected, most were infected abroad, in so-called highly endemic areas, such as Africa and, to a lesser extent, they have been infected by living with a person who was infected by blood transfusion or drug abuse or, most rarely, by sexual contact with a prostitute.

Thus, there is some spread from high-risk groups to the normal populace, but this is extremely limited. By the end of January of this year, 277 persons were classified as "probably infected heterosexually."

In 1987, 30 people died of AIDS, compared to "only" 21 in 1988. This also indicates that the treatment of AIDS patients is improving. By the end of January, 262 people in Sweden had developed AIDS and 125 of these had died.

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