Specter of AIDS Shifts To Developing Nations

National Geographic For AP Newsfeatures

The Ugandan woman, full of dreams of a family, farm and home of her own, once said, "But I feel I am haunted by ghosts that will not leave me." She was 22, pregnant with her first child, and she had AIDS. She and her baby are buried in the African fields behind her parents' home

young Thai prostitute, fresh Bangkok brothels, returns home to her village in the north with badly needed cash for her family, but with a grim bonus this time: the AIDS virus.

A newborn boy in Bucharest, skeletal and abandoned, is transfused with AIDS-contaminated blood. Most of Romania's known AIDS victims are infants and children.

As of mid-1990, more than 66,000 cases of acquired immune deficiency syndrome have been reported to the World Health Organization from 150 countries. But WHO experts estimate AIDS may afflict 700,000 people. The disease is often neither reliably reported nor recognized. The global balance of human

immunodeficiency virus (HIV) infections, which cause AIDS, is rapidly shifting from industrialized nations to developing countries, says Michael H. Merson, director of WHO's global AIDS program.

Two-thirds of the estimated 8 million to 10 million HIV-infected people in the world now live in developing countries. Five years ago about half did. By the end of this decade about 80 percent will, Merson says. AIDS has become a primarily

heterosexual disease. At least 60 percent of the world's HIV infections result from heterosexual intercourse.

For many people in poorer countries, AIDS is a stigma or a curse - a sickness of shame and superstition. Ignorant, confused and scared, they suppress word of the virus.

The major reason the disease has switched to developing nations, Merson told National Geographic, a rise in the number of HIV infections in Asia, the most heavily populated part of the world.

Initially infections were spread in Asian countries by intravenous drug users, then by prostitutes." At least 500,000 people are estimated to have been infected in the past two years.

Thailand's permissive and lucrative sex industry, a national tourist attraction, may make the Southeast Asian nation vulnerable to skyrocketing HIV-infection rates.

The virus was introduced there only about three years ago, Merson says. Today, experts estimate that as many as half of the prostitutes may be infected in some Thai cities. Health officials fear the discase's spread to the general population. HIV infections are now most

acute in sub-Saharan Africa, which has more than half of the world total. Unlike the pattern in most Western countries, where infected men predominate, African men and women are equally afflicted. WHO

among intravenous drug users." The United States still leads in reported AIDS cases, nearly 134,000.

Although France, West Germany, Spain and Italy cite the most cases in Europe, the Romanian situation is shocking, says Dr. William Griffo of New York Hospital-Cornell Medical Center, who recently did volunteer work there.

Romania's AIDS babies weren't born infected. They were injected with the virus through tainted blood transfusions or unclean needles. In a small survey of hospitals and orphanages, Griffo says, 700 to 800

A world with AIDS

Continent	HIV (AIDS virus) infection	AIDS cases reported*	AIDS cases estimated
Africa	3,500,000	63,842	375,000
Americas	2,500,000	153,720	250,000
Asia	150,000	644	1,200
Europe	500,000	33,896	45,000
Oceania	30,000	1,976	2,500
Totals	over 6,500,000	254,078	650,000

SOURCE: World Health Organization

estimates one in 40 adults is infected there.

Another tragedy of AIDS in Africa is that about a third of the babies born to infected mothers will be infected," says Dr. Joe H. Davis of the U.S. Centers for Disease Control.

AIDS has traveled through Central and East Africa along transportation routes and among urban prostitutes. A survey in Kenva found that a majority of Nairobi's prostitutes have the virus.

In Uganda, which reports 12,500 AIDS cases, more than any other African country, AIDS has invaded every district, striking farmers and townspeople alike. In some places a funeral for an AIDS victim takes place nearly every day. Children are often cared for by grandparents because AIDS killed both parents.

The AIDS toll also is heavy in Zaire, Zambia, Malawi, Tanzania,

Kenya, Rwanda and Burundi. But "our predictions that AIDS would be a plaguelike disease devastating some African populations appear unfounded, because fertility rates remain so high," Davis says. Why have HIV infections slowed

most developed countries? Partly, Merson explains, "because of education within the gay community and a saturation level children tested positive.

"I had never seen such deprivation and cruelty toward children, such ignorance and superstition surrounding AIDS," Griffo says. "Nurses recoiled at me picking up

KRTN Infographics/RON CODDINGTON

these babies without gloves and a mask." The extent of the Romanian epidemic is unknown. As the isolated nation opens its doors, Griffo fears the disease could accelerate.

"Prostitutes hanging around hotels haven't a clue what HIV is or about appropriate protection." The prevalence of HIV is not likely to stabilize globally for several decades, Merson warns.

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By Deborah Simpkins Duke University News Service Five years ago Helen Quigless of

Tarboro began to lose her vision. "I was watching television, and I

noticed people's faces would get blurred, and I realized I was in big trouble," she said. "Bit by bit, seeing would get more difficult." Although she nearly went blind, in 1988 Quigless regained partial vision in one eye. Today she is one of an estimated 1.4 million people in the United States who have severe visual impairments, known as low vision. Ranging from partial loss of vision -- which cannot be corrected to normal sharpness with ordinary eyeglasses or contact lenses to total darkness, low vision usually results in patients altering

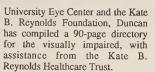
their lives in some way. Until recently, little was available for such patients. Nancy Duncan of Durham is helping change all that.

In cooperation with Duke

YOU & YOUR CHILD by Eileen Adams

The Adoption Question Q. My husband and I have been married for four years and have a 3-year-old son. Our little boy is wonderful, but we'd always planned on a bigger family. Now, however, the doctor has said my husband is sterile, so we un't have any more children. As far as I'm concerned, this doesn't mean the end of the world. We could adopt! My husband seems to think this will upset our son, but I'm sure lots of families have both "natural" and adopted children. Surely we can work it out. Am I right?

A. You're right that you can work it out, baa it does require work. There are many things to consider, not the least of which is your son. Many experts agree a young child can experience feel-ings of inadequacy and low selfworth when an adopted child is brought into the home. Also, the standard feelings of jealousy are bound to show up. These conditions are especially prevalent when the adopted child is older than the biologically natural child. In this instance, the first child often feels displaced and rejected, as he, until the point of adoption, will have been the sole object of his parent's affection. This is not to say adoption is a bad idea. In fact, it's a wonderful way for people to share their lives and loves. You should just be forewarned that your husband is onto something by recognizing the possibility for strife. If you're intent on adoption, the best advice is that you adopt a child younger than your son. This way his hierarchy is not upset. Of course, feelings of sibling jealousy are inevitable, but that would be the case if you and your husband brought a baby home from the hospital, too! Nonetheless, make an effort to explain to your son, in very simple terms, how you want to adopt a baby. Be sure to stress that he stands only to gain the love of a new family member and that he won't be los-



The directory was edited and is being distributed by Visual Impairment Information Inc. of Durham, a non-profit group, with assistance from the N.C. Society of Ophthalmology and the N.C. State

Optometric Society. Approximately 3,000 directories will be printed, with Braille and audio tape copies available soon. The directories will be distributed free to the public through county libraries, ophthalmologists, optometrists, clinics, state agencies and Lions Clubs. Individuals who want their own copies will pay only mailing costs.

The directory is divided into 13 categories: adjusting to vision loss; causes and treatments of vision loss; increasing income and lowering expenses: horizon ad life style; adaptive aids and inputers; emotional su, ort; reading methods; recreation and leisure; early childhood development and preschools; elementary school, high school and college; employment; legal rights; and networking with local resources. Duncan hopes it will help people keep their lives as ormal as possible. "There are hundreds of agencies

all over the United States that have something to offer visually impaired people," Duncan said. However, she found only one similar directory, the Massachusetts Directory for the Disabled, that is specifically for people with impaired vision. Given its broad definition,

impaired vision can be caused by birth defects, injuries, aging, cataracts, glaucoma, damage to the optic nerve or deterioration of the optic nerve or deterioration of the retina. According to the American Academy of Ophthalmology, impaired vision is the third greatest handicap (after heart disease and arthritis) among those over age 65.

Quigless, whose vision problems were caused by an unusual case of rheumatoid arthritis that repeatedly attacked her corneas, described the

dark days of losing her vision. "When the first [cornea] flare-up occurred, I was in deep trouble, but at the time I didn't have any visual problems," she said. "Bit by bit, seeing got more difficult. I couldn't balance my checkbook. That was a horrendous thing. I had to trust people to write my checks. When you lose your sight, you get very dependent." Duncan, who has a master's degree in psychology and has been a volunteer counselor at Duke University Eye Center for four years, understands the need to offer support and guidance to those losing their vision. She is legally blind.

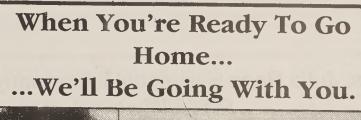
physician cannot offer visu improvement. I felt that the patients were often left alone wi their impairment and had no id where to turn. This help stimulate our search for availa services for visually handicapp people. To my surprise, many m existed than I had thoug However, no single source inquiries existed. Therefore, developed the idea to establish compendium of all services for the visually impaired." "This prime document will be a resear-directory for people in Nor Carolina," Duncan said, "but the "ill he collection for parts of the the will be only the first step, rat than the final step in our projec. The Visual Impairment Informati Inc. started a hotline for No Carolina in May (1-800-543-2107 The American Council for a Blind already operates a nation hotline two hours each day, Dun said, but the information is general.

"People's questions are specific she said, adding that many cal request volunteer drivers, a people with diabetic retinopathy retinal problem caused by diaba often need someone to help u monitor their insulin dosage.

For more information on hotline or the directory, call the center's Planning and Developm Office at (919) 684-3182.



During the past few month generic prescription medicin have been in the news. Early # ports indicated that a few gene medicine manufacturers falsifit certain data submitted to the U.S. Food and Drug Administration (FDA). One manu





MONROVIA, LIBERIA — A Liberian rebel fighter shoots and kills a man found hiding in his house allegedly with a government uniform and bullets among his possessions. The man was believed to below to a rival tribe. (UPI Photo)

Help For The Visually Impaired

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member and that he won't be los-ing your love at all. Best of luck. Adoptions can be wonderful experiences. But like anything else worth having, it will take some effort on your part. Also, I suggest you talk with your husband and family before you beein Interesting perspectives begin. Interesting perspectives could be surprisingly insightful.

(Legally blind is a term the government developed to determine who can use the services for the blind, Duncan said. People who have 20/200 vision even with the best correction are considered legally blind, as are those who have no light perception at all.) Duke became involved in this project as part of its mission to serve patients.

"Duke provides a low vision clinic to introduce these patients to visual aids that may assist them in daily life," said Robert Machemer, M.D., chairman and Helena Rubinstein Professor of ophthalmology, "but we at the eye center needed to offer more." "We see so many patients in which the

facturer used a competitor's bra name medicine in testing rath than its own generic product.

In August, the governmen announced, "there is no eviden that the safety or effectiveness o generic drugs has been comp mised." More recently the FD has stepped up its review generic drug companies. Safet testing of the 30 most common prescribed generics was begun More than 1,000 samples from hundreds of manufactures were collected for analysis. The FDA announced plans to strengthen th oversight of generic drug review through a newly established gen eric drug office. And the government has pledged that it will move rapidly to have unsafe o ineffective drugs removed from the market.

The recent difficulties with few generic drug manufacture does not mean that all generate of questionable quality. you have questions about the generic medicines you may b taking, please ask us for advice.