

## AIDS Treatment: Valuable, But Not Cure

In a breakthrough for the treatment of certain AIDS-related diseases, a North Carolina company will soon begin marketing the life-prolonging drug AZT.

Federal officials announced Sept. 19 that preliminary testing of AZT (azidothymidine) showed that the drug curbed the effects of AIDS in some people. The drug is manufactured by the Burroughs Wellcome Co., based in Research Triangle Park, N.C.

Federal and company officials say that the drug could have serious (or fatal) undiscovered side effects, and that it is not a cure for AIDS, according to the *Raleigh News & Observer* (9/20/86). It might have to be taken for life by people with AIDS.

But leaders in the effort to combat AIDS hail it as an important first step in fighting the syndrome. "Our objective data on the drug tell us that this is the best thing. It prolongs life, it has low toxicity, few side effects (and) it is effective," said Dr. Mathilde Krim, co-chair of the American Foundation for AIDS Research in an interview with *Philadelphia Gay News* (9/26/86). "You can say that I am delighted, very happy, very hopeful."

Burroughs Wellcome said it would make the drug available as quickly as possible — perhaps as early as January. It would be distributed, free of charge, to people with the AIDS-related pneumonia known as *Pneumocystis carinii* pneumonia.

There are other requirements to receive AZT. The recipient needs the approval of a doctor with knowledge of AIDS. And according to *The New York Times* (9/20/86), the person with AIDS must meet other medical criteria and cannot be enrolled in any other drug experiments.

Between 2,000 and 7,000 of the nation's 11,000 people with AIDS may be eligible to receive the drug.

The company is still testing the drug to determine if it is effective against ARC, or AIDS-Related Complex. If it is effective, thousands more people will be able to benefit. Up to 250,000 people may have ARC, according to the federal Centers for Disease Control.

Much more testing is needed to determine if the drug would help the million or so people who test positive for the antibodies for the HIV virus, which causes AIDS.

At a press conference held the day of the announcement, Garrison R. Kaufman of the N.C. Lesbian and Gay Health Project said the news was "welcome" but expressed some concerns.

"The confirmation...that...AZT treatment has shown some beneficial effects in people with AIDS and people with AIDS-Related Complex is welcome news," said Kaufman. "The fact that this disease is striking with such deadly force against America's prime, people between the ages of 25 and 50, has given a special urgency to the call to find a treatment and cure for AIDS."

"But this added urgency is not without its complications. While the Health Project does not propose the withholding of AZT or any medication from people in need of it, the general distribution of AZT may have major implications for further research into a treatment and cure for AIDS."

"AZT...is not a cure," he continued. "To find a cure, further drug trials, trials of drugs not yet created, will be necessary. These trials will require the cooperation of people at risk for AIDS as well as those who already have the syndrome, the same population as that which might benefit from AZT."

"From the outset of drug research, people with AIDS have been involved, putting themselves at risk of major toxic side effects and even a hastened death. Can we anticipate that this population will continue to place itself at the same risk when a possible palliative is available to them?"

As a result, Kaufman said, "what will happen to future drug trials is a major concern. However, the

potential specter of denial of AZT to ensure a so-called 'willing' population for further drug research is even more frightening."

A Charlotte securities analyst had another warning: that the results of the AZT test could mislead the public into thinking there has been a cure.

"We run the risk of having [AIDS] pushed off

the front burner," Craig Dickson told *The Charlotte Observer* (9/20/86). Dickson, a biotechnology analyst for Interstate Securities Corp., is also the former assistant director of the Illinois Cancer Council.

"If the public becomes convinced the problem is solved, it is possible that the push for research might be shouted out by demands for other

programs, such as drug abuse."

According to *The News & Observer*, the most recent test began in February and studied 280 patients at 12 research centers. Most had pneumocystis or ARC. Half received AZT; the other half received placebos (pills with no drugs in them).

Of the 17 people who have died since February, only one was being treated with AZT. The rest were receiving placebos.

A panel monitoring the test for the federal government concluded that the drug had proven effective, and recommended that placebo-testing be stopped.

The panel's decision came after six months of discussions involving government scientists, Burroughs Wellcome and others including Mathilde Krim. Since the spring, Krim called for "compassionate use" of the drug, and she believe her lobbying speeded up the process.

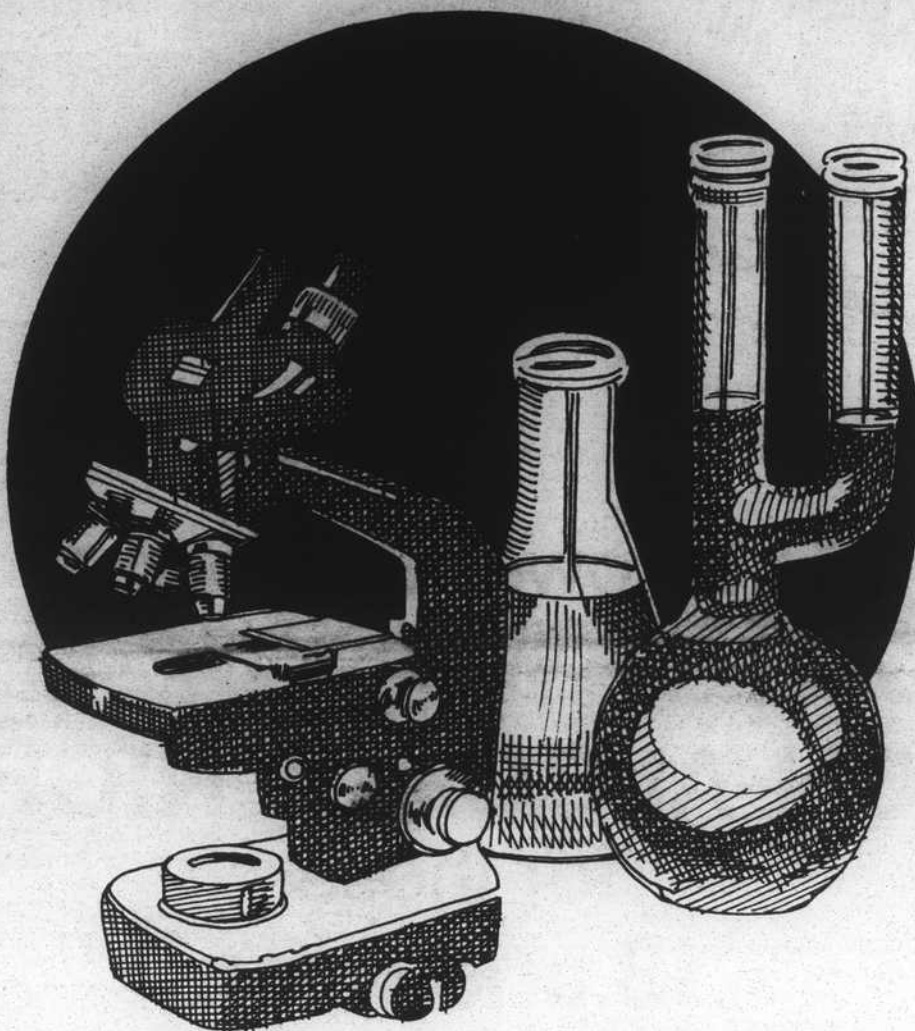
"Making a little fuss, I think, has helped this happen that much sooner. I have said for a long time that this drug is effective. I think the published reports, what the government has said, are exaggeratedly cautious."

The Public Health Service has set up a toll-free phone number for information on the program. The number — open daily until midnight — is (800) 843-9388.

Before the announcement Sept. 19, the *News & Observer* predicted that AZT "could become the centerpiece of pending federal legislation to spend \$47 million treating every AIDS patient in the country in one of history's largest drug experiments."

The Health Project's Garrison Kaufman says it's unwise for the government to put all its efforts into finding a cure. "The federal government's continued emphasis on funding research...to the exclusion of funding education for the prevention of AIDS will assure the United States of a continually growing population of people with AIDS," he said.

Kaufman charged that the government is reluctant "to discuss openly risk reduction guidelines such as safer sex practices." As a result, he said, "thousands of people, unaware of preventive measures, are being exposed" to the virus that causes AIDS.



## Education Is Still The Best Idea

North Carolina State University, like the other schools in the University of North Carolina system, has adopted a set of policies recommended by a special university AIDS Task Force and is undertaking an educational program on the syndrome.

The task force, chaired by Dr. Carl J. Dolce, dean of the NCSU School of Education, was appointed last year by Chancellor Bruce R. Poulton and asked to obtain the latest medical and legal knowledge about AIDS and recommend appropriate steps to take in the event that a case of AIDS occurs at NCSU.

Underlying the policies is a directive from the University of North Carolina system barring the exclusion from enrollment or employment of people infected with the AIDS virus, "unless medically-based judgments in individual cases establish that exclusion or restriction is necessary."

The task force recommended that such judgments be made by a "University Response Team."

The report notes the necessity for decisions to be made on a case-by-case basis, which is consistent with the approach taken in a U.S. Department of Justice legal memorandum about AIDS and

employment issued last June. The report also said that since there will be campus-wide efforts to encourage people who might have AIDS to confidentially seek medical help, maximum effort will be made to protect the privacy of those people.

"The university will not routinely inform others of the existence of individual cases, except as required by law," the task force said.

Along with names of people exposed to AIDS, the university will also refuse to release any information that might identify them, such as their residence halls or offices. Otherwise, the university will cooperate with the new media to provide general statistical information.

The report also said that people with AIDS are not required to inform the university. Therefore it stressed the importance of initiating an education program aimed at the entire university community, urging those who think they might be infected to conduct themselves responsibly and seek medical assistance from the Student Health Services.

"Because of the voluntary nature of individual reporting, we will not be able to maintain any meaningful statistics on the incidence of AIDS at NCSU," said Dr. Robert G. Moseley, Student

Health Services physician and a member of the task force.

The education program began last spring and was expected to be fully geared up by this fall. It will target high-risk groups, but get information out to the entire community.

The report said such an education program can "reduce unnecessary anxieties."

In August, a UNC official announced that all schools in the system would hold education programs to allay fears and stop discrimination against victims.

"We're going to contribute to the national education effort designed to curtail the spread of the disease," said Dick Robinson, UNC's assistant to the president for legal affairs. "This is all we have. We don't have a treatment. We don't have a cure. But we have facts." (*Fayetteville Observer*, 8/14/86)

At a conference at Fayetteville State University, Robinson explained that printed material will be distributed, discussion groups will be formed and presentations will be made at freshman orientations. Residence hall directors and assistants

continued on page 12