

Police deny AIDS list



George Bakan, president of the Seattle AIDS Action Committee, is pictured (left) speaking at the Municipal Building to picketers responding to police AIDS list. (Photo by Jim Arnold.)

by **RON ENDERSBY**

According to sources connected with organizations working with people with AIDS, the Seattle Police Department, or certain officers in the department, have constructed and circulated a list of persons with AIDS. The list is reported to contain the names of ten King County residents with the deadly disease.

When contacted by *Seattle Gay News*, Assistant Chief of Police Noreen Skagen said that this list, should it exist, did not have the authorization of the Seattle Police Department. Skagen seriously doubted that the list in fact exists.

Skagen added that the department has recently viewed a videotape concerning AIDS prepared by the King County Department of Health to alert officers to the realities of AIDS. Skagen also noted that that it is understandable that some police officers would have serious concerns in dealing with people with AIDS, considering the lack of valid information about the disease.

She did not know how the officers in question could find out if the person they were dealing with had the disease.

Dr. Steve Helgerson, Director of the Seattle/King County Department

of Public Health AIDS Project said that if there is a list of people with AIDS, it should not be in the possession of the police department. If there was not such a list, added Helgerson, then the actions of the police officers concerned with the issue are indeed questionable.

According to Helgerson, "If it does exist, it should be burned." Helgerson's main concern was confidentiality.

Assuming that the police did not simply draw the ten names out of the phone directory, what then was the source of the list?

George Bakan, president of Seattle AIDS Action Committee, commented that "the list personifies all the fear and mystique we've been seeing across the country about AIDS." Bakan and the Seattle AIDS Action Committee formed a picket line at the Municipal Building at the Mayor's office. Unfortunately, the picket did not attract great numbers of participants and the press found themselves equal in number to the group of pickets.

Seattle Gay News attempted to contact Mayor Royer's office via press aide Maureen Sullivan concerning the list. The mayor's office has failed to return the call.

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GAY STD ADVISORY GROUP MEETS

by Tim Burak

Representatives from the Health Department's STD Clinic at Harborview, the Seattle Gay Clinic, and the Dorian Group held a formal/informal meeting on the evening of March the 2nd to discuss the changing health needs of gay men in Seattle and King County. The meeting grew out of a series of exchanges that were sparked by an editorial written by Dr. Hunter Handsfield for the September, 1981 issue of the American Journal of Public Health. Dr. Handsfield hoped to establish an environment in which representatives of the gay community could brainstorm and share concerns in such a way as to help the Health Department to reassess its role and performance in control of STDs in gay men. All participants agreed that the get-together was a success (as was the Chinese dinner, afterwards), and the group will meet on a monthly basis.

The Seattle Gay Clinic is an all-volunteer community based STD screening and referral activity that operates out of Country Doctor Clinic two half-days per week. The Dorian Group is a statewide human rights and public information oriented organization that plays an advocacy role regarding public issues that affect the lives of lesbians and gay men. All three agencies hope to maintain an ongoing dialog, and meetings are tentatively set to occur on the first Tuesday evening of each month.

TRANSFER OF INFORMATION
SEATTLE - KING COUNTY DEPARTMENT OF PUBLIC HEALTH

Jesse Tapp
TO.....
Re.....

Tim Burak
FROM.....
Address.....

10-2
Date.....
Clinic No.....

Thanks for recommending the AJPH article and Hunter's editorial. From my limited experience so far, I'd say the Seattle Gay Clinic staff would like to view their work as a specialized complement to (and conduit to) the Harborview STD Center, rather than an isolated "additional category" clinic. As such I think the SGC supports his goal ("...the development of strong affiliations between public STD clinics and comprehensive medical centers.."), i.e.: SGC → HMC/STD → HMC/comprehensive.

I was mistaken about Dr. Hughes; he's not currently a volunteer physician at the clinic.

I'm attaching a copy of the clinic's brand new brochure (we're pretty proud of it.)

Jim

Health officials investigate six more AIDS cases in state

By Solveig Torvik
P-I Reporter

Six more cases of AIDS are likely to be confirmed shortly in Washington state, bringing the total to a dozen, the director of the federal government's AIDS task force said in Seattle yesterday.

Six AIDS (acquired immune deficiency syndrome) cases have been confirmed in Washington to date, said Dr. James Curran of the Centers for Disease Control. Other suspected cases are under study and "the number may double," he said at a press conference. Curran, here for a convention of the International

Society for Sexually Transmitted Disease Research, gave no information on the identity of the new victims.

The government is engaged in an all-out effort to find the cause of the disease, which is an "infection of unprecedented proportions," said Dr. Kenneth Sell of the National Institutes of Health.

The risk is small, however, that heterosexuals or non-drug users will contract the disease that has killed 743 persons since it was identified, said Dr. Anthony Fauci, immunologist from the institutes.

Gay men with multiple sexual partners, illicit drug users, Haitian

immigrants and hemophiliacs are in the high-risk group.

There have been 1,922 confirmed cases of AIDS in the nation and only 6 percent have not been members of these groups, the scientists noted.

Little forays

"It may go out (of the risk group) in very small little forays," Fauci said, but he added that scientists expect it will confine itself to those groups.

Curran said that because the disease has not spread more widely out of the risk groups and has had a relatively slow growth rate, he

thinks it "is quite difficult to transmit."

Curran added that the public at large is not threatened by social contact with persons in the high-risk groups. Sell said no health workers have developed AIDS from treating patients with the disease.

Curran said he is encouraged by a 40 percent drop this year in the rate of gonorrhea among gay males in Denver and San Francisco since AIDS prevention information has been publicized in those cities. He said this may indicate that the disease, which is thought to be sexually transmitted among gays, See **SIX**, Page A-8

Six more victims of AIDS

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can be contained.

Gay males with multiple sex partners have been asked by health authorities not to donate blood, but Sell stressed that patients needing transfusions should not avoid them for fear of developing AIDS.

He said 20 cases of AIDS have been traced to blood transfusions during a period when 20 million transfusions were given.

"Blood is not the primary route of transmission of this disease," he said. Frequent sex with multiple partners is needed, he added.

Sell said AIDS symptoms, which include fever, swollen glands, skin cancer, or pneumonia, initially are similar in many ways to other diseases such as hepatitis.

However, some people who have AIDS have virtually no symptoms in early stages, he said. "We have one patient where the only symptom was loss of sexual drive," Sell added.

Scientists don't know if the disease is an old one showing up in a variant form in a new population or a new disease.

Symptoms or causes?

"It is likely that some new or modified agent is instrumental in causing AIDS," Curran said.

It is also unclear whether some symptoms commonly thought to be the result of AIDS are actually the causes of the disease, Sell said. Another possibility is that the disease requires more than one virus to be present to cause the immune breakdown, he added.

The researchers are focusing on the behavior of cells that are, in Fauci's words, "turned on inappropriately" by various viruses.

He said a bone marrow transplant between 35-year-old identical twins, one of whom was a homosexual with AIDS, has shown a partial restoration of the sick man's immune system defenses, but the individual is not cured. It is too soon to tell if the transplanted cells will also be attacked by the disease, Fauci said.

Dr. W.W. Darrow of the Centers for Disease Control, who tracked the spread of AIDS among a group of gay males in Los Angeles and New York, said homosexuals should be aware that the risk of contracting AIDS increases as the number of sex partners increases.

POLITICAL HIGHJUMPERS

Wishing they would leap for children's diseases

I have mixed feelings about the hoopla accompanying actions in the County and City Councils designating Adult Immune Deficiency Syndrome (AIDS) as an urgent public-health problem. On one hand, with the fall-off in funding for biomedical research, perhaps it takes more than reason to find the necessary dollars to attack a pressing health problem. On the other hand, I don't feel that the amount of political support a disease attracts should necessarily determine the amount of scientific attention it receives.

To put the matter in perspective, AIDS claimed four victims in King County last year, whereas there were 61 victims of Sudden Infant Death Syndrome and 58 children who died of traumatic injuries.

I don't wish to minimize the tragedy of AIDS nor the necessity of funding to seek its cause and prevention. I only wish to illustrate how high politicians jump when faced with a problem of adults as opposed to children.

— Abraham B. Bergman, M.D.,
325 Ninth Ave., Seattle

Deadly 'gay disease' found in heterosexual Seattle man

by Warren King
Times medical reporter

A 42-year-old heterosexual Seattle man has been diagnosed as having a deadly disease that usually affects homosexual men.

The man, who has not traveled out of Seattle in two years, also is unlike most others who have the disease, acquired immune deficiency syndrome (AIDS).

He has not used drugs intravenously and is not Haitian or a hemophiliac.

"We don't know what caused it ... He's very frightened because he's seen the news reports about AIDS," said Dr. Hunter Handsfield, director of the Seattle-King County Health Department's Sexually Transmitted Disease Control program.

It was the second case of the rare disease diagnosed in Seattle in a week. A 27-year-old homosexual man was diagnosed with AIDS last weekend. The only other Seattle case was found last summer in a homosexual man who traveled frequently to San Francisco.

Handsfield, a researcher of AIDS, visited the latest victim in

the hospital yesterday. He said he is seriously ill with a rare form of pneumonia that usually follows AIDS.

"He's very short of breath. It was a major chore for him to talk to me," said Handsfield.

Handsfield would not give more details about the man or say where he's hospitalized because the patient is very worried about his privacy.

Only 5 percent of the 980 AIDS cases diagnosed in the United States have been in patients who aren't homosexuals, drug users or hemophiliacs.

In AIDS, the body's disease-fighting cells are suppressed. It frequently leads to a rare pneumonia, "Pneumocystis carinii," or to Kaposi's sarcoma, a rare form of skin cancer. Symptoms of the disease are prolonged, unexplained swelling of the lymph glands and fever.

About 40 percent of those with AIDS have died and doctors say more than 90 percent will die within two to three years after getting the disease.

No one has been able to determine the cause of AIDS, and

there is no precise test for determining its presence.

Handsfield and a scientist with the federal Center for Disease Control in Atlanta said they only could speculate on why someone who doesn't fit the usual pattern for the disease would come down with it.

The person could be lying about his sexual orientation or drug use. However, Handsfield said the Seattle man "is definitely heterosexual."

The person could have been a close associate of someone who unknowingly has AIDS. Or it may be transmitted by means other than those suspected by researchers — anal or oral sexual contact or by blood.

"Since we don't know what the agent is, other means of transmission are possible," said Dr. Peter Drotman, a member of the federal team researching AIDS.

"There also may be a risk factor we just don't know about," said Handsfield.

Drotman said it's also possible the man doesn't have AIDS, even though he fits the CDC test that is based on many other cases.