

HEALTH

FORUM FANS FEARS

I am uncertain about the potential increase of AIDS in Vancouver; but I do know that after the symposium held on Saturday, March 12, at the West End Community Centre, there are 300 new cases of fear and paranoia engendered by a well-intentioned medical profession.

Before I attended the symposium I did not know what caused AIDS. I still don't. I know what some of the warning symptoms of AIDS are; I have a better idea of what to do if I contact AIDS or one of its "opportunistic" diseases; but I do not know what causes AIDS. But then, the experts do not know either.

The symposium was chaired by Dr Geoff Mains, PhD and featured doctors Brian Willoughby, MD, Michael P Maynard, MD, Steven Sacks, MD, Mr Paul Popham, founder of Gay Men's Health Crisis Group (GMHC) in New York and Rev Ernie Lacasse, Pastor of MCC Vancouver.

Dr Willoughby stated that AIDS, or Acquired Immune Deficiency Syndrome, is a now

phenomenon. Previously it was found only in older men, and the prognosis was for 10 to 12 years. Hence, it was no big deal. Now it is being found among the 4 "H" groups (homosexuals, Haitians, heroin addicts and haemophiliacs) with a prognosis of 2 years. There is now a great deal of concern.

There are evidently two main forms. The first affects those white corpuscles which fight viral, parasitic and fungal infections. The other is Karposi's Sarcoma.

Dr Maynard reported that there were 1,112 cases as of March 1. He expects that the number will double every 6 months reaching a total of 10,000 in 2 years. Of the total, 47% of the diagnosed cases have been in New York; 19% in San Francisco. Seventy-four per cent of the cases have been among gay and bi-sexual men.

The symptoms and signs of AIDS include swollen lymph glands, purplish spots, unexpected weight loss (more than 10 lbs in 2 months), fever, night sweats, persistent cough or diarrhoea or unexplained fatigue.

Dr Sacks stated that you can catch AIDS from people with colds or from fecal-oral



Panel at AIDS symposium (from left to right: Brian Willoughby - MD, Michael Maynard - MD, Dr Geoff Mains - chairman, Steven Sacks - MD,

Paul Popham - founder of New York Gay Men's Health Crisis organization, and Pastor Ernie Lacasse - MCC.



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contact (rimming) or being the passive recipient in anal intercourse.

How can you avoid getting AIDS? Dr Maynard cheered us all up by telling us to decrease the number of sexual partners and the incidence of anal sex, rimming and fisting. He added that we should not have sex with unhealthy people and avoid intravenous drugs and drug abuse in general. We should also get plenty of rest, nutrition and exercise.

Finally Dr Willoughby told us that the cause of AIDS is unknown and that there is no direct test for it. There is no way of telling whether a unit of blood is safe or not. Gays who are sexually active should not give blood, he said. Instead they should find a lesbian (lesbians have the lowest incidence of AIDS) to take their place as blood donors.

Paul Popham spoke of the social implications of AIDS. He said that it was an epidemic killing gay men all over the world. Free sexual expression might be fatal, he said. He said that it was not his business to tell us how to live our lives (Ha!), but that discovering freedom was not everything. We can be faithful to our partners and gain satisfaction by working as a part of the community.

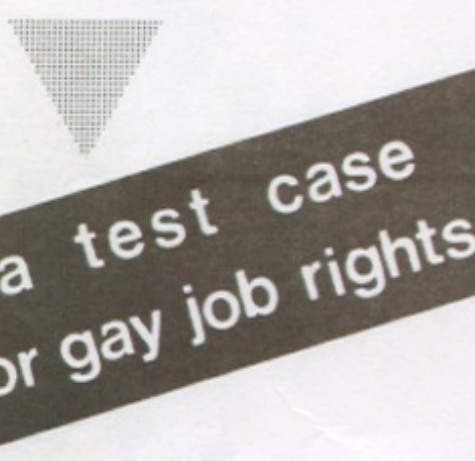
Rev Lacasse surprised me by being the least judgmental of all the panelists. He voiced great Christian concern by exhorting us not to shun those who are imperfect or who are ill; but rather to give them our support. AIDS is not God's punishment on gay people, he said, unless Legionnaire's Disease was God's punishment on armed services veterans.

Ron Alexander spoke briefly on the formation of AIDS Vancouver. It is an organization trying to educate gay men around this health issue. He said that all clubs and organizations were asked to donate money in order to produce a leaflet, but only Buddy's, Garden and Club Baths, Dignity, the Gandydancer, John Barley's, Shaggy Horse and the Zodiacs have come across.

The symposium and the brochure have done the gay male community a great service by alerting us to the signs of AIDS and what to do if we have or suspect we have the disease.

They may have done us harm, however, by exhorting us to make life style adjustments based on an unproved supposition.

Greg Cutts, during the question period, relentlessly pressed the panel on the num-



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er of sex partners question. The panel re-iterated that no one knows what causes AIDS. The "infection agent" cause is an assumption. "Last year AIDS was caused by poppers; this year it is caused by promiscuity," said Cutts. One can only wonder what next year's cause will be. I personally nominate raisins, boiled pork and Social Credit.

I welcome health care information being made readily available for gay people. I welcome discussions on gay life styles and how we can enrich our personal and sexual lives as gay men. Issues such as monogamy and taking responsibility for our sexual conduct are important. To link social conduct to a disease whose causes are still unknown may be irresponsible. All that is accomplished is guilt and paranoia. It smacks of the media scares around cyclomates and herpes.

Instead of medical moralizing and fear promotion, we need to put political pressure on all levels of government to spend money on researching the causes and cures of this loathsome disease. If this disease were predominantly attacking straights, the reaction would have been immediate.

Fred Gilbertson



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DOCTORS WARN GAYS

The analysis presented in the preceding article differs from most of the opinion presented by the guest speakers at the AIDS symposium. Following are some quotations from the speakers themselves.

Dr Stephen Sacks stated that "Hepatitis B and AIDS have a lot in common, including some modes of transmission."

Sacks went on to suggest that in the case of Hepatitis B, "the virus from one person is concentrated in the semen, and with anal intercourse there can be tearing of the mucous membrane in the anus--small little cracks and breaks in the skin that might not be felt. Contacting (such infected) semen is much like injecting something directly into the vein with a needle."

"We know that gay men who get Hepatitis B are those people who most commonly participate as passive recipients in anal intercourse."

Maynard discussed ways to reduce the risk of contacting AIDS. They include the following:

1. Decrease the number of different sexual partners cutting out anonymous one-time sex.
2. Reduce the number of contacts of anal or oral-anal sex.
3. Don't get involved with someone whose health you're not sure of.
4. Do not use intravenous drugs or get involved sexually with people who do.
5. Get a lot of rest, make sure you have adequate nutrition, decrease stress, get exercise and cut down on your use of drugs, recreational or prescription.

Paul Popham gave a personal account of his own experience and that of New York AIDS organization and the effect this health crisis has had on the gay community in New York. According to Popham, "the equation is pretty simple--free sexual expression...might be fatal. It might. We don't know for sure. Nobody does. But common sense will tell you that having indiscriminate sex in New York today puts a gay man at a dangerously high risk."

"The Gay Men's Health Collective has consistently taken the position that we felt it a duty to inform gay men everywhere, accurately and honestly. But we are not in the business of telling people how to live their lives.

"As much as we miss that special freedom (casual sex) we discovered that it

wasn't everything. It may sound a little corny, but a lot of men in New York are discovering feelings they haven't felt in a long time. Feelings we had back when we were just learning to handle ourselves in the gay world.

"We treat each other with more respect, and we love more. There's more touching, more smiling and more laughter.

"We're not alone now. We're very much together and we'll get through this somehow. And, although we're paying a terrible price, we're finding in ourselves a much greater strength than we've ever dreamed of."

Rev Ernie Lacasse of the Metropolitan Community Church talked about the importance of "not turning away from our friends who become sick, but to try and reach out to them and give them love and support."

Maynard speculated on the future possibilities of AIDS spreading in Vancouver. "Most researchers believe that there is a long latent period between catching the infectious agent (if indeed it is an infectious agent) and coming down with the disease—at least 18 months. We already have, we believe, at least six people in Vancouver with AIDS. During that 18 months a person is probably contagious." David Myers

INTERVIEW: POPHAM

Paul Popham, founder of the New York Gay Men's Health Crisis, and a member of the panel at the Vancouver AIDS seminar at the West End Community Centre March 12, was interviewed by VGCC News reporter David Myers.

DM: How did you get involved in forming the Gay Men's Health Crisis organization in New York?

PP: I became involved because it (the AIDS crisis) touched my life so deeply. My best and closest friend in New York City was the first Kaposi's Sarcoma patient treated at New York University Hospital. . . My lover died of AIDS nine months after my best friend and I had one other very close friend die, also within that nine month period. So when you've had something like that happen to you it's almost impossible not to get involved.

Gay Men's Health Crisis was formed a year and a half ago. From that time on we have become a full-fledged service organization to the gay community, providing crisis intervention to any patient that's told he has AIDS. We provide support groups for AIDS patients, to parents of AIDS patients who cannot tell their friends and family that their son is an AIDS victim.

We have a support group for lovers or care partners of AIDS patients to try to help them deal with what they're going through. The only thing that we're not doing is providing direct support, financially, to AIDS patients. We don't do that because we don't have the financial or staff resources to do so.

DM: Is it true that the earlier you discover that you have AIDS the better the chance for survival?

PP: The survival chances are proportionally related to how early you've been diagnosed, how early you get into a treatment, and how carefully you monitor yourself and what you're doing after diagnosis. It's important that every gay man knows the symptoms of AIDS and as soon as a symptom appears that he gets to a doctor who is knowledgeable about AIDS to determine if in fact he could conceivably be an AIDS victim.

Education about AIDS can save lives in the community. We had a forum recently in New York at which 2000 people attended. That week, after the forum, six people who had been at the forum, saw slides of a K-S lesion, actually had the lesions and didn't know they had it and because of that forum ended up seeking medical treatment.

There are people here in Vancouver,

