Editorial

AIDS mafia changes its tune

According to a story by Randy Shilts in the April 20 issue of the San Francisco Chronicle, the San Francisco AIDS Foundation and various health officials called for testing of high-risk people for HIV, making the foundation the first agency of its type in the United States, according to the press, to make such a call. The foundation will publish full-page ads in San Francisco gay newspapers calling for testing.

Dr. Tim Wofford, the foundation director, said that they changed their position, in part, because of breakthroughs in preventing AIDS-related pneumonia and because of benefits of early use of AZT. Dr. David Werdegar of the San Francisco Department of Public Health was quoted in the press saying, "Times change. . . . Earlier is better. Earlier introduction of health care works better. That's true of all health situations, and it's true of HIV."

Now, the benefits of early use of AZT and some of the breakthroughs in treatment of AIDS-related pneumonia have been known for over a year or more. Yet when EIR medical editor John Grauerholz, M.D. advocated widespread testing, for precisely the same purpose of identifying persons who might benefit from early therapeutic intervention, he was denounced as "mean-spirited" and "vicious," among the milder epithets hurled by such gentlemen as those cited above.

This acrimony occurred during the debate over California's Proposition 69, which proposed to deal with the spread of HIV infection in the same way in which the public health system deals with any other infectious disease. After all, as Dr. Werdegar is now willing to admit, "Earlier is better. That's true of all health situations and it's true of HIV." Indeed; and it always was true, even when these same gentlemen were foaming at the mouth against anyone with the temerity to raise such a point.

Perhaps the learned gentlemen of the San Francisco AIDS Foundation feel that since "political extremist" Lyndon LaRouche, who supported Proposition 69 and its predecessor Proposition 64, is safely locked up, they can now admit the truth—the truth, by the way, which

they were perfectly aware of, even while they were lying that Proposition 69 mandated locking up all seropositive persons in concentration camps.

Dr. Grauerholz recalls, "One of the more striking manifestations of this awareness was a comment made to me after a radio debate in Los Angeles on Proposition 69. As we were leaving the studio, my opponent, Dr. Laurens White of San Francisco, president of the California Medical Association, turned to me and said, 'Between you and me, it wouldn't be a tragedy if this thing [Proposition 69] passed.' This, from the same gentleman who characterized me as 'mean-spirited' and who described Mr. LaRouche's comparisons between AIDS and other infectious diseases as 'bizarre,' even though Mr. LaRouche and myself were making the same point as Dr. Werdegar."

In the time which has elapsed since Propositions 64 and 69, many persons have been infected with HIV, many of the infected have become sick, and many of the sick have died—some of them assisted with a little euthanasia on the way out. If widespread testing will help now, it would have helped even more then, when the numbers were smaller. It is obvious that many now infected would not be infected, many now sick would not be sick, and many now departed would still be among the living.

How many? This is more than an academic question, and the answer would be a quantification of avoidable human suffering and death. It is a question that were most fittingly asked, and an answer sought, at a new Nuremberg Tribunal at which officials such as Dr. White and institutions such as the San Francisco AIDS Foundation are called to account for policies whose consequences they knew or should have known.

It is but one more indication of the fascist police state which we are becoming, that a man who called attention to the homicidal consequences of present policies now languishes in prison, while those responsible for thousands of deaths can nonchalantly decide to change their policy once they are satisfied that an adequate death toll will anyway be achieved.