Asian AIDS epidemic to rival Africa soon

by Mary M. Burdman

The AIDS epidemic now threatens the two most populous nations on Earth: China and India. Thailand is also facing an AIDS crisis. The disease is spreading most quickly in the immediate wake of ever-greater drug consumption in these countries, as huge opium crops year after year make the heroin so cheap that even impoverished Chinese and Indians can afford to inject the dope.

In Asia, as in Africa, or in America's city slums, AIDS is striking heterosexuals. There is pathetically little information available about the situation, because little testing has been done, but already rates of HIV infection among prostitutes in Bombay, India and in Thailand's second-largest city, Chiang Mai, is over 40%. Among the poorest of Chiang Mai's prostitutes, 72.2% were HIV-infected as of a full year ago.

Southern China and India are among the most densely populated areas in the world. These are huge tropical areas. While the possibility of AIDS transmission by insects has been hysterically denied by the AIDS research mafia, independent researcher Dr. Mark Whiteside has presented compelling evidence that that is just what happened in the tropical southern United States.

AIDS hitting China

Even the Chinese Communist government, which for years has churned out propaganda claiming it had eliminated drugs and prostitution, suddenly has had to admit the opposite. Up until this year, the government had insisted that there was no AIDS problem in China except among those few who associated with "foreigners." But on Feb. 7, the official Xinhua news service reported that by the end of 1989, one hundred ninety four people infected with the AIDS virus had been found on the Chinese mainland — and only three of them were not Chinese. AIDS had spread to 10 provinces and autonomous regions, the report said, and local governments had been have been told to carry out — at their own expense — a ban on prostitution, drug trafficking, and drug addiction. This fivefold rise in reported cases came only from testing "high-risk" groups.

The same day, China's state radio quoted senior Health Ministry official Dai Zhicheng that AIDS in China "is no longer a myth. The spread of this disease is in fact very serious. . . . Our abilities to control this disease are limited

and we do not have the whole situation in hand."

If the Chinese authorities admit to over 100 cases of AIDS, the situation is very grave, the China editor of Hong Kong's largest newspaper, the South China Morning Post, told EIR. He said that the figures the officials give must be taken as only 10% of the real number, so that it is very possible that there could be 1,000 deaths from AIDS in the near term. The world must take the situation very seriously, he warned, because AIDS will spread very rapidly in China.

Yunnan, the southern province of China that borders on Burma, is the focus of the problem. Yunnan, part of the "Golden Triangle," has long been the center of drug production and trafficking in China. Last year police arrested 2,000 drug addicts in the provincial capital city of Kunming alone, and the 146 cases of AIDS infection were found concentrated in Ruili county on the border. At least tenced to death for drug trafficking in Yunnan last year.

The province is now putting all diagnosed AIDS virus carriers under local quarantine, and is attempting a three-year plan to contain the disease. Carriers must register so their movements can be traced; and AIDS-testing operations are being expanded. But poverty has reduced treatment to the pathetic: Traditional herbal medicines are now being tested for a possible cure.

'Rock Hudsons' in India

The deadly drugs-AIDS complex is now spilling over into bordering regions in India. In the eastern Indian state of Manipur, close to the Burmese border and an influx point for Burmese-Chinese heroin, the first HIV-positive patient was recorded in January. In the last six months, more than 220 people have tested positive. Out of this grouping, 214 are intravenous drug users and six donated blood. There are an estimated 15-20,000 drug addicts in Manipur.

In the cities, the problem is worse. In Bombay, 40% of the 100,000 prostitutes are infected with AIDS, estimates Dr. Geeta Bhave, the head of the Indian government's only AIDS surveillance center. Dr. Bhave told the British daily *Guardian* that the government had budgeted almost no money to deal with the crisis, and she attempts to treat infected prostitutes—all of whom go on taking customers, some up to 20 a day—with homeopathic medicine, which is all she can afford. The government maintains that there are only 2,167 cases of HIV infection among the 461,118 people tested in the screening program begun in 1986, but this is a gross underestimate, Dr. Bhave and others state. Many desperately poor "professional" blood donors who are HIV-positive continue to sell their blood, by going to towns where they have not been screened.

But it is not only the poor in India who are infected. Dr. Bhave reported that her program also gets blood samples from the "five-star" hospitals patronized by India's upper classes, and many are HIV-positive. It is only a matter of time before India has its own "Rock Hudson" AIDS death.

EIR July 6, 1990 Economics