

EIR: How does the picture look in Venezuela?

Grauerholz: The picture in Venezuela is again a very preliminary one. As I said, one of the strains of this virus apparently originates among Indians in the remote Orinoco region of Venezuela. They have a small number of officially reported cases, 50 or so, and all of these appear to have come into the country or to have been associated with contact outside Venezuela. But the number is increasing, and I know that the military hospital in Caracas is quite concerned; they have problems getting the nursing staff to handle the bodies.

With this disease, when you are just beginning to see the cases, the thing has already been there for five or more years, and has infected a lot of people. But you have to be able to diagnose that infection. I don't think the [testing] kits are as widely available as they are in the United States, because of financial and other reasons. They are going to have to be able to acquire the kits or produce their own, in order to test their population and to find the true extent of the problem. They are concerned to not repeat the mistakes of the United States, of not starting to look diligently until they've had a million or more people already infected.

EIR: So one of the first steps is to make the tests widely available?

Grauerholz: Yes, the test has to be widely available, and the test has to be applied, and the public health measures of quarantining where necessary have to be applied. Now, if they have a small problem confined to risk groups in these countries, all well and good; they will have a small problem which they can keep small. But the longer the implementation of these measures is delayed, the more generalized the problem is going to become.

EIR: You showed some slides of the computer model run projecting the spread of AIDS under various policies in the United States. What was the reaction to that?

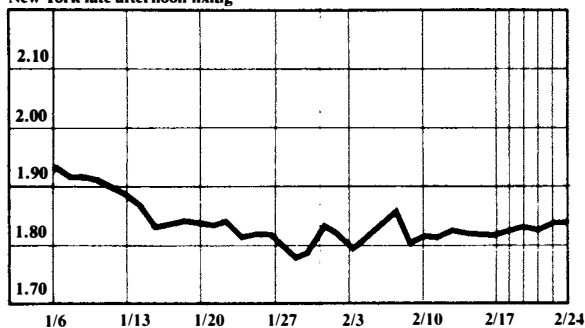
Grauerholz: Well, they were quite impressed since the model run [see *EIR*, Vol. 13, No. 48, Dec. 5, 1986] indicates that about the year 2014, 80% of the U.S. population will be infected, sick, or dead, absent the implementation of some sort of public health measures to stop the spread of this disease.

The one thing I was impressed with in these countries is that there is still more of an interest in survival among these populations than in the industrial nations of the West. They have not come into the extreme cultural pessimism of the United States and Western Europe. Some of the cultures such as Brazil are bizarre, but fundamentally, they are growth-oriented cultures. This is one reason why they are certainly more receptive to the truth about the disease, because I think they are much more concerned with actually trying to do something to stop it. They are not viewing this, as I think a great deal of the United States tends to view it, as the fulfillment of a 25-year cultural death wish.

Currency Rates

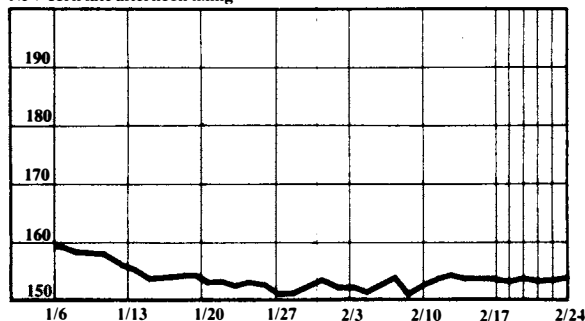
The dollar in deutschemarks

New York late afternoon fixing



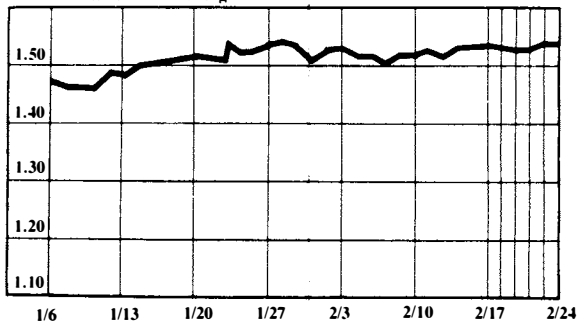
The dollar in yen

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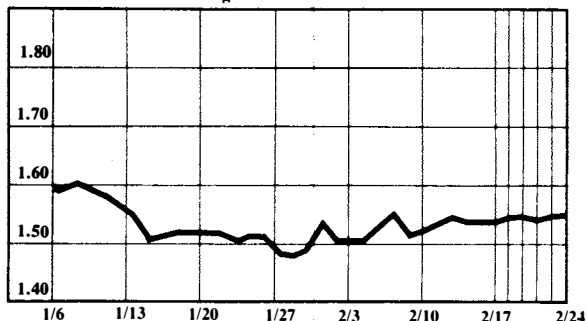
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