Conference Report

Can Thai public health officials check the spread of AIDS?

by Sophie Tanapura

Executive Intelligence Review joined with the Lions Clubs of Bangkok (Thailand) Rajasa, Bangkok Phrakanong, and Bangkok Phramahanakorn to host a full-day conference on July 9 in that capital city, "Can Present Government Measures Stop the AIDS Virus?"

Officials of the Public Health Ministry together with representatives of the *EIR* Biological Holocaust Task Force spoke at the conference, which was designed not only to assess the AIDS situation in Thailand, but to try to learn from the mistakes made in other countries where the AIDS epidemic is much more advanced.

The conference drew some 120 participants, the vast majority of them from Bangkok's medical community. Groups also came from the Lions Clubs that helped finance the conference.

As of June 30, 1988, Thailand had 934 AIDS-infected citizens, 923 of whom live in Thailand. Of these, the vast majority, 776, are heroin addicts. Only 9 are full-blown AIDS cases.

Thai public health officials have admitted that they were misled by information provided by international organizations which had over-emphasized transmission of the virus by way of sexual intercourse as the most efficient means. Therefore, it is only recently that they have begun mass testing of drug addicts, especially those using needles, i.e., heroin addicts.

According to the official statistics presented by Dr. Amnuay Traisupa, director of the Venereal Disease Division at the Health Ministry, it is estimated that there are 100,000 drug addicts in Thailand, 80-90% of them heroin addicts. Given the most recent statistics obtained from blood testing among addicts, there is every reason to believe that needlesharing among drug addicts is the most efficient means of transmitting the AIDS virus. The interface between AIDS and the problem of drug addiction has forced the Thai government to face a very difficult problem. Further testing in this particular high-risk group is certain to reveal more HIV-infected people. These carriers are highly dangerous, be-

cause needle-sharing is not only an economic problem, but is virtually a ritual among heroin addicts.

When informed of the most recent statistics on the number of HIV-infected among drug-addicts, Dr. John Grauerholz, coordinator of the EIR Biological Holocaust Task Force in the United States and a conference speaker, suggested that these cases be pinned on a map to see if there is any clustering pattern. If such clustering is evident, then the next step should be broader testing of the population in those particular areas, to determine if the virus has moved from the high-risk group into the general population. If it has, then questions must be asked as to the possibility of transmission of the virus by means other than that which is evident for this or any other high-risk group. In addition, environmental factors must be seriously investigated in the area of clustering.

The importance of monitoring

Dr. Grauerholz, who spoke on "The AIDS Epidemic Worldwide and the Situation in the United States," stressed that monitoring the number of HIV-infected is perhaps the most important task of any government. With the AIDS virus, one is dealing with a lenti- or slow virus, whose incubation period is very long. If one waits to count the number of actual AIDS cases, one is looking at a situation which has been building up for 5, 10, or even 15 years, since that is the probable time period which has elapsed since the current AIDS cases were initially infected, and during which these victims were in all probability spreading the infection to others.

Dr. Grauerholz warned, "The threat we face is as much a result of the present approach to the problem as it is a result of the biological nature of the infection itself. In the face of a spreading pandemic of a lethal, incurable infection, for which we possess no vaccine, the national and international public health agencies have dispensed with many of the disease control measures which mankind has built up in its centurieslong war against infectious disease."

Faulty premises have to be changed if we are to act effec-

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tively to combat this species-threatening infection. Stated Dr. Grauerholz, "One of the most strongly held positions of the public health establishment is that HIV is a sexually transmitted virus which is also present in, and transmissible by, blood and blood products, and which can be passed from an infected mother to her offspring. Transmission by means other than homosexual or heterosexual sex, sharing of needles by drug addicts, or passage from mother to child is asserted to be rare, or nonexistent."

Dr. Grauerholz said that "authoritative" institutions such as the World Health Organization, the Centers for Disease Control, or the U.S. National Academy of Sciences often assert that HIV cannot be spread by "casual or environmental contact with an infectious individual, or by vectors such as biting insects," when there are ample reports that the contrary may just be true.

After extensive discussion with the conference participants on this issue, Dr. Wiwat Rojnapithayakorn of the AIDS Center of Thailand had to admit that even if it is not probable, although possible, that mechanical transmission of the virus by way of insect bites and saliva can occur, precautions are necessary to eliminate the slightest possibility of transmission of the lethal virus.

Dr. Wiwat announced at the conference that Thailand is perhaps one of the few countries, if not the only one, to have mapped out its own medium-term program to stop AIDS. The Thai government had decided to allocate 43 million baht over a period of four years for the fight against AIDS, showing that a certain priority has been given to the dangerous disease.

Unlike many other countries, Thailand began random testing of blood units in January 1987. However, since Oct. 1 of last year, it has been policy to test all blood units in the Bangkok Metropolitan Area and suburban areas, despite The World Health Organization's advice that this would not be "cost-effective."

In June, the Public Health Ministry decided to acquire testing facilities for 77 public hospitals in the provinces. It is clear that Thai public health officials are moving in the direction of broader testing.

A threat to our species

Dr. Jonathan Tennenbaum of the *EIR* Biological Holocaust Task Force in West Germany, told the conference, in his afternoon presentation, that humanity has never been confronted with a disease or epidemic such as AIDS, where the virus has such a long incubation period that if it is not checked, it is perfectly capable of wiping mankind from the face of the Earth.

The reason we know that such a disease has never existed, Dr. Tennenbaum stated, is that we are still here today. Unlike other epidemics such as cholera, which may initially infect a larger and larger number of victims, but will taper off by itself because the infectious period of the cholera victims is

relatively short, the number of HIV-infected grows with time because of its very long incubation period.

Dr. Tennenbaum then presented the Bangkok audience with his computer simulation of the AIDS epidemic in the United States, in which it is predicted that 30 years from now, more than 80% of the U.S. population will be either infected or dead, if basic health measures to control infectious diseases are not adopted, and if a cure is not found in the meantime. If basic public health measures were adopted now, Dr. Tennenbaum said, the curve of the infected and dead could be reduced by sixfold, but would still continue to rise over the 30-year period.

It was proposed at the conference that *EIR* be provided with AIDS data for Thailand, so that a computer simulation could be done in order to better convince experts that the threat of the epidemic is indeed real.

In concluding his presentation, Dr. Tennenbaum, on a note of optimism, said that an eventual cure for AIDS may not be found in the field of medicine at all, but rather in the area of physics known as optical biophysics. A handful of scientists are presently investigating the radiation and electromagnetic properties of cells. A better understanding of these properties, which are key in differentiating between healthy and unhealthy cells and between living and dead cells, may help us win the war against the AIDS virus.

Still a 'young' situation

It must be noted that the AIDS situation in Thailand is still young, and with the right kind of public health measures, the AIDS epidemic may be controllable until a cure can be found. Public health officials in Thailand take pride in the sovereignty they retain in deciding what to do or not to do in implementing measures necessary to control disease.

So, there is a difference in the way public health officials deal with the AIDS problem in the United States and in Thailand, and there is the difference in the response they are getting from the AIDS-infected and the general population on the AIDS issue. This can be partially explained by the difference in cultural matrix of the two countries. Unlike the United States, which is today imbued with liberalism, Thailand is still a very conservative society, where religion continues to provide moral guidance for the general population.

In the concluding conference panel on "AIDS and the Socio-cultural Environment," Dr. Wanlop Piyamanotham, a psychiatrist who specializes in treating homosexuality, noted that in Bangkok and other tourist towns, the estimated number of prostitutes and homosexuals has reached alarming proportions. A return to traditional Thai moral values and behavior should be encouraged. "French kissing is not part of Thai culture," he remarked.

During the conference, several references were made both by the speakers and the audience to the third Buddhist precept ("Thou shalt not commit adultery") as perhaps one of the more efficient means of stopping AIDS.

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