Chronicles of the AIDS Debate


Twenty-five years ago on April 23rd, Secretary of Health Margaret Heckler and a virologist from the National Cancer Institute named Robert Gallo, held a press conference to announce that the probable cause of AIDS had been discovered.¹ From that time on, research funding would be concentrated on the virus, which came to be known as HIV, the Human Immunodeficiency Virus. Earlier attempts to interpret AIDS as a multifactorial syndrome, especially by New York City doctor Joseph Sonnabend, were cast aside in favor of the retroviral hypothesis.²

It was a turning point in AIDS research, perhaps the most significant turning point, and for the entire quarter of a century, there have been a few scientists and doctors who thought otherwise, who have consistently maintained that April 23, 1984, was the day that AIDS research went wrong.³

How you make sense of a book like Celia Farber’s Serious Adverse Events, depends very much on where you were in the evolving story of AIDS, and how the causation controversy was presented to you, and what was your access to alternate and opposing views.⁴ There was no internet in 1984, so you couldn’t just “Google it.” Four years later, if you just happened to pick up the January 12, 1988 issue of the New York Times, you might have seen a short puzzling article, “Solitary Dissenter Disputes Cause of AIDS.” The author, Philip Boffey, described the objections to the HIV hypothesis raised by Prof. Peter Duesberg of the University of California, and continued thus: “The implications of this thesis, should it prove correct, would be enormous. Virtually all of the research aimed at developing a vaccine to prevent AIDS or drugs against it would be off target. And the current antibody tests used to protect the blood supply or identify infected individuals would be pointing in the wrong direction.”⁵
The next year, if you stopped in at a meeting of the famous AIDS advocacy group ACT UP, you might have picked up a photocopy of Dr. Sonnabend’s “Fact and Speculation About the Cause of AIDS,” or Bob Lederer’s “Hiding Behind HIV: Why the Medical Establishment Won’t Look at Cofactors,” from the Gay Community News. If you read the gay magazine New York Native, you saw articles by John Lauritsen calling into question the official version of AIDS. If you read Spin or Gear, or several other marginal publications, there were articles by Celia Farber. If you weren’t paying any attention to any of these (and that includes most of us) then you simply did not know what a fundamental split had taken place, and how deep the disagreement over the role of HIV was, extending even to whether AIDS was infectious or non-infectious.

And so Melville House, a small independent publishing company in Hoboken, has done a valuable service in allowing Celia Farber to collect and update her series of magazine articles exploring the HIV and AIDS controversy, two decades of AIDS reporting that has made an awful lot of people very angry. I don’t know how many hundreds of times someone has shown me an article about AIDS from the New York Times, whereupon I say “But that assumes that AIDS is caused by HIV,” whereupon they respond, “Well after all these years we simply can’t go back to square one!” I don’t know how many dozens of times I have asked, “When are they going to stop calling these poisons medicine?” and heard the reply, “When are you going to stop calling the medicines poison?” After a while, there is no more exchange of information, no more debate, a painful and unproductive polarization sets in, and then the really serious name-calling begins, in which one side cries out “Myth Peddlers!” and the other side responds in kind, “Denialists!”

You cannot read Celia Farber’s book, or Peter Duesberg’s Inventing the AIDS Virus, or Gary Null’s AIDS: A Second Opinion, unless you have become exasperated with the state of polarization into which the AIDS debate has sunk, and want to investigate it more thoroughly. My own threshold of cognitive dissonance was breached by an article in the Times last November, accusing former President of South Africa Thabo Mbeki of being responsible for the deaths of over 350,000 people. This astonishing
article, “Study Cites Toll of AIDS Policy in South Africa,” was on the front page, and based upon a study by a group of researchers at Harvard University, published in the Journal of AIDS.14

“The Harvard study concluded that the policies grew out of President Thabo Mbeki’s denial of the well-established scientific consensus about the viral cause of AIDS and the essential role of antiretroviral drugs in treating it.”15

Into what context does such a serious accusation go, and how do you evaluate the claims of the Harvard study team, that was supervised by long-time AIDS researcher Max Essex?16 Let us delve into some detail at this point, in order to show how dramatically different the history of AIDS research appears in establishment periodicals, from how it appears in the writings of Celia Farber and like-minded skeptics.

The Harvard team sums up the case for the first AIDS drug in question, AZT, by claiming “[AZT] was tested for AIDS treatment in controlled randomized clinical trials, and its side effects were clearly documented and disclosed.”17 The tortured history of AZT and its approval, a history that Gary Null and his co-author needed 80 pages in order to describe for their readers,18 is reduced to one sentence, with one footnote, to a study that appeared in the New England Journal of Medicine in 1987, by Margaret Fischl and her colleagues at the University of Miami Medical School.19 Nothing that took place after that study was thought worth citing by the Harvard study team, not even the reservations by the head of the FDA panel that considered AZT, concerns about its toxicity that moved the panel chairman, Dr. Itzhak Brook, to vote against its approval.20 You read about that controversy in Celia Farber’s book, not in the Harvard team’s paper.

In support of the other drug in question, Nevirapine, the Harvard team cited a September 1999 article in the British Medical Journal Lancet, describing a trial in Uganda known as HIVNET-012.21 In this trial, pregnant women were given either AZT or Nevirapine in various quantities, and then after they gave birth, their newborn babies were given small doses of either AZT or Nevirapine, and the results noted. When HIVNET-012 was reviewed three years later, an NIH medical officer named Betsy Smith
wrote a scathing account of irregularities, that was then re-written and softened by her supervisor, Dr. Ed Tramont of the NIH AIDS Division. Excerpts from her evaluation of HIVNET-012, side by side with excerpts from Ed Tramont’s re-write, were uncovered and published by Associated Press reporter John Solomon in December of 2004. When NIH clinical safety officer Dr. Jonathan Fishbein re-examined the trial and confirmed the allegations, he was fired in July of 2005, sought whistle-blower protection, and was then reinstated in another division in 2006.

The criticisms of HIVNET-012 created an enormous furor in Africa, and were the subject of a lengthy statement by the African National Congress, asserting that Africans were being “used as guinea pigs.” This resulted in further stories by Jon Cohen in Science Magazine, by Donald McNeil in the New York Times, by Jennifer Kerr in the Associated Press, by the Alliance for Human Research Protection, and finally by Celia Farber, whose 2006 article in Harper’s Magazine is excerpted in Serious Adverse Events.

Not one word about the Nevirapine controversy appeared in the Harvard team’s paper, not one single blessed word. The deaths of the Ugandan babies -- 16 on Nevirapine and 22 on AZT -- are unmentioned. The attempts of the NIH’s own analysts and whistleblowers to acknowledge the tragedy, not worthy of recounting. President Mbeki’s request for an across-the-board debate over all aspects of AIDS, its causation, prevention and treatment, also not worth mentioning.

Is there any room for disagreement here, about AIDS in Africa, whether it could be significantly different from the syndrome in Europe and the United States, and require a different response? Would the HIVNET-012 study have caused more of a furor if the volunteers had come from the students and faculty of Johns Hopkins University, where the Lancet researchers were headquartered, and 38 of their babies had died? Would that have carried more meaning for us than the deaths of the Ugandan children, and generated a more elaborate press record, and a longer public memory?

These are speculative questions, and in order to consider them, you have to place the wildly disparate opinions side by side, and make room in your thoughts for the complexity of the situation.
What is in the process of being decided here is not just the reputation of former President Thabo Mbeki, but indeed whether the next 25 years of AIDS research will continue exactly as the past 25 years, a most dismal and forbidding possibility. That is why I wholeheartedly recommend Celia Farber’s book, if nothing else as a corrective for the establishment-biased coverage that appears in our “paper of record,” the New York Times. Let us take the opportunity of the 25th anniversary of the Gallo/Heckler press conference, and resolve not to rest in the painful and unacceptable polarization that characterizes present-day discourse on AIDS, and to forego the simplistic words and trite rejoinders of the past. Let the AIDS debate continue, and all of us develop some respect for those who disagree with us, and a willingness to listen.

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NOTES


3) For a long account of the fate of the various dissenters in the first decade of the HIV & AIDS controversy, see “Dissension in the Ranks,” Chap. 7, p. 219-253 of Inventing the AIDS Virus, by Peter H. Duesberg.


8) John Lauritsen’s articles, most from the New York Native, were collected into a full-length book, The AIDS War: Propaganda, Profiteering and Genocide from the Medical-Industrial Complex, Asklepios Press, New York, 1993.

9) For an index of Celia Farber’s online articles, see www.virusmyth.com/aids/index/cfarber.htm. Her own website is found at http://www.celiafarber.com.

10) For the record, the strict multifactorial model describes AIDS as a complex syndrome, in which some co-factors are infectious (such as Epstein-Barr Virus, Cytomegalovirus, Hepatitis-B, Syphilis, Gonorrhea, Chlamydia, and Candidiasis) and other co-factors are non-infectious (such as overuse of tetracycline, Bactrim and other antibiotics, nitrite inhalants popular in the gay community, designer drugs, IV drugs, etc). Simplistic reductions as “AIDS is caused by drugs,” are not much of an improvement over “AIDS is caused by HIV.” Each risk group has to be taken separately, and no single AIDS paradigm can be superimposed on another population. Once we get beyond the destructive polarization which now prevails, this will all become clearer.

Prof. Duesberg’s position: “Thus AIDS does not meet even one of the classical criteria of infectious disease. In a recent response to these arguments, Goudsmit, a proponent of the HIV-AIDS hypothesis, confirmed that "AIDS does not have the characteristics of an ordinary infectious disease. This view is incontrovertible" (Goudsmit, 1992). Likewise, the epidemiologists Eggers and Weyer conclude that "the spread of AIDS does not behave like the spread of a disease that is caused by a single sexually transmitted agent" (Eggers and Weyer, 1991) and hence have "simulated a cofactor [that] cannot be identified with any known infectious agent" (Weyer and Eggers, 1990). Anderson and May (1992) had to invent "assortative scenarios" for different AIDS risk groups to reconcile AIDS with infectious disease. Indeed, AIDS would never have been accepted as infectious without the numerous unique assumptions that have been made to accommodate HIV as its cause.”

(From “Infectious AIDS: Stretching the Germ Theory Beyond its Limits,” by Peter H. Duesberg, PhD, Int Arch Allergy Immunol, 1994; 103: 118-126)


12) A decade ago, before it was fashionable to brand all critics of the HIV hypothesis “Denialists,” journalists of all persuasions wrote detailed accounts of the problems with the new HIV drugs that appeared. Compare the dispatches below from the New York Times, with similar stories by Celia Farber in other publications, and decide for yourself whether there are any significant differences in perspective.


17) The Harvard study, op cit, p. 411


Also this excerpt from the Times: “The practice has split the medical community. Some doctors supported it as a compassionate response to an unusual threat. Others were deeply alarmed, saying they could not recall when a drug with such toxic potential had been so widely prescribed for a condition other than those specified by the Food and Drug Administration.

“I don't think there was ever before a situation like this in medicine,” said Dr. Itzhak Brook of the Uniformed Services University of the Health Sciences in Bethesda, Md., who was chairman of an FDA advisory committee that evaluated AZT. “This is just what I was afraid of.”


23) Excerpt: “The 2002 warnings about the drug, nevirapine, were serious enough to suspend testing for more than a year, let Uganda's government know of the dangers and prompt the drug's maker to pull its request for permission to use the medicine to protect newborns in the United States. But the National Institutes of Health, the government's premier health research agency, chose not to inform the White House as it scrambled to keep its experts' concerns from scuttling the use of nevirapine in Africa as a cheap solution, according to documents obtained by the Associated Press.

The documents show that Tramont and other NIH officials dismissed problems with the nevirapine research in Uganda as overblown and were slow to report concerns to the Food and Drug Administration. NIH's nevirapine research in Uganda was so riddled with sloppy record-keeping that NIH investigators could not be sure from patient records which mothers got the drug. Instead, they had to use blood samples to confirm doses, the documents show.” (From “Research Flawed on Key AIDS Medicine,” by John Solomon, Associated Press, December 14, 2004, found at www.washingtonpost.com/wp-dyn/articles/A62360-2004Dec13.html)


The HIV/AIDS Controversy: A Short Book List

AIDS, Inc.
John Rappoport
Human Energy Press, 1988
1020 Foster City Boulevard, #205
Foster City, CA 94404
AIDS: The HIV Myth
Jad Adams
St. Martin’s Press, New York, 1989

The AIDS War
by John Lauritsen
Asklepios, June 1993
26 St. Mark’s Place
New York, NY 10003

Rethinking AIDS: The Tragic Cost of Premature Consensus
Robert S. Root-Bernstein

You Don’t Have to Die: Unraveling the AIDS Myth
Leon Chaitow, ND, DO & J. Strohecker
Future Medicine Publishing, Inc. 1994
10124 18th Street, Court East
Puyallup, WA 98371

AIDS
Peter H. Duesberg, PhD
John Yiamouyiannis, PhD
Health Action Press, 1995
6439 Taggart Rd.
Delaware, OH 43015

The Gravest Show on Earth: America in the Age of AIDS
Elinor Burkett
Picador USA, New York, 1995

Inventing the AIDS Virus
Peter H. Duesberg, PhD

Impure Science: AIDS, Activism and the Politics of Knowledge
Steven Epstein
University of California Press, 1996
Science Fictions: A Scientific Mystery, A Massive Cover-up, and the Dark Legacy of Robert Gallo
John Crewdson
Little, Brown & Company, Boston 2002

AIDS: A Second Opinion
Gary Null & James Feast
Seven Stories Press, New York, 2002

Serious Adverse Events: An Uncensored History of AIDS
Celia Farber