

[REDACTED]
Fort Atkinson Wi 53538
November 6, 1993

Mr. Brian Lamb, Pres.
C-Span
400 North Capitol St N W #650
Washington D C 20001

Dear Mr. Lamb:

C-Span is great! It makes TV worthwhile.

We especially like Booknotes. You do a good job there.

AIDS and its treatment should be discussed completely as related to the Health Care Plan. A review of Dr. Monteith's book AIDS, The Unnnecessary Epidemic would be timely and of great value to us. We've not been able to understand the lack of effort to control this fatal disease. Why the cover-up?

We grew up in an era of quarantines and public health measures which were effective in bringing diseases under control.

To us the approach on HIV shows complete lack of common sense.

You seem to have and to exhibit a great deal of common sense in your programming.

You are making a great contribution to making this a better country. We appreciate your efforts and thank you very much.

Sincerely,
[REDACTED]

*Saying this isn't a
very good copy.
But we could do.*

AIDS: The Needless Epidemic

Are we being told the truth about AIDS? Or is the media, in league with a pro-homosexual lobby, lulling us into a false sense of security about the spread of HIV into the general population?

Stanley Monteith, M.D., an orthopedic surgeon in Santa Cruz, Calif., deals with some of these questions in *AIDS: The Unnecessary Epidemic* (Covenant House Books, 1991). An evangelical Christian, Monteith has waged a largely unsuccessful battle to get health officials to take ordinary public-health measures to bring the disease under control.

He talked with CATHOLIC TWIN CIRCLE about AIDS, HIV and why he thinks our country is in for a shock about this deadly disease.

CATHOLIC TWIN CIRCLE: Did you title your book "The Unnecessary Epidemic" because you felt that if AIDS were being treated as a disease instead of a civil-rights issue, we would have it under control by now?

Stanley Monteith, M.D.: Yes, and we would be saving millions of lives, not only in America but all over the world.

Because of pressure from the gay lobby, standard public-health techniques — like identification of HIV carriers and contact tracing of partners who may have gotten infected — have never been used. Gays who are infected want to remain anonymous, or they claim they will be discriminated against. The Centers for Disease Control [CDC] has gone along with their wishes.

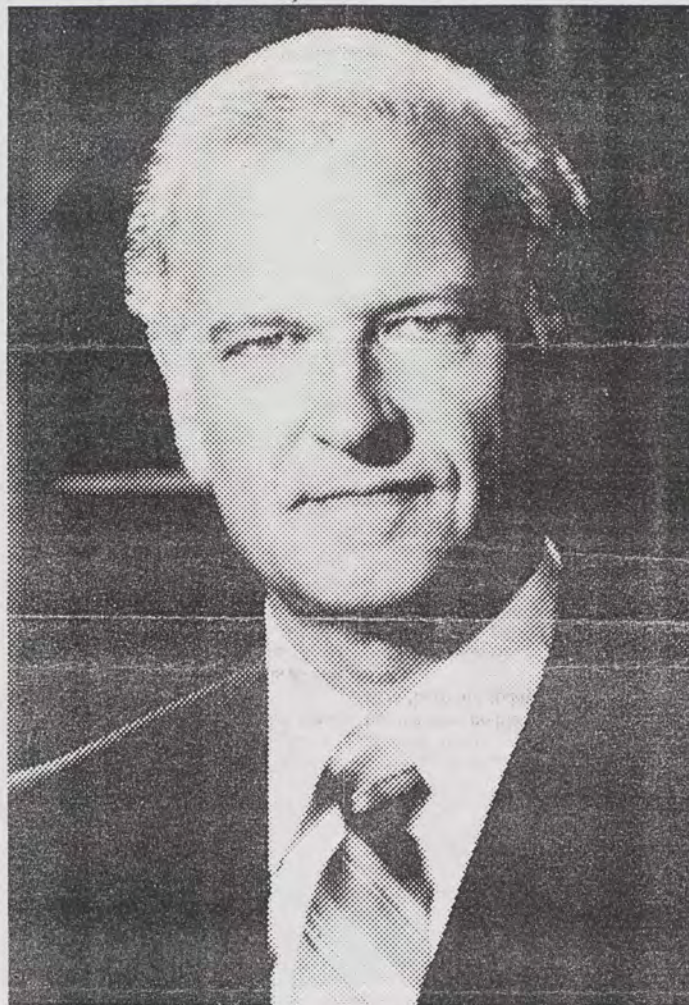
Diseases don't have to rage out of control the way AIDS is.

In the 1930s, before the advent of antibiotics, syphilis was a real threat in this country. But the surgeon general ordered doctors to do routine syphilis testing on all patients. Infected patients were followed up with contact tracing to find out who had transmitted the disease and who was secondarily infected.

Syphilis was thus brought under control even before antibiotics were available by using standard public-health techniques. They have never done this with HIV.

CTC: Your book says that in 1985 the Centers for Disease Control did everything it could to discourage surgeons from testing people for HIV before operating. In other words, the CDC protected the anonymity of HIV carriers even when this put medical personnel at risk.

Monteith: Yes. For example, in 1985 in California, we saw the passage of AB403, a state bill which said that HIV was not to be treated like other diseases. Blood-test results were to be held in total confidentiality so that no one besides the doctor and the patient could know either that the patient had an HIV test done or



Stanley Monteith, M.D., has waged a largely unsuccessful battle to get AIDS treated as a disease rather than as a civil-rights issue.

what the results of that test were. If the doctor violated confidentiality, he faced a \$10,000 fine and a year in prison.

This led to the dangerous scenario that if an HIV-positive patient were undergoing surgery, only his immediate doctor could know and no one else dealing with the patient's blood could be alerted to protect themselves. Similar laws were passed all over the country.

In 1987, the CDC softened this a little by saying surgical personnel should treat everyone as if they had AIDS and use "universal precautions" like wearing gloves. But even gloves will not protect surgical staff from needle-stick injuries.

CTC: Your book also says that because HIV is still not a reportable disease and the Centers for Disease

Control refuses to monitor HIV, the only statistics available tell us where HIV infection was 10 years ago but not where it is today.

Monteith: Yes. The CDC monitors every type of disease in this country except HIV disease, which inevitably leads to AIDS. The figures we get are for AIDS, but we have no idea how many HIV carriers there are today.

CTC: Dr. James Curran who heads the Venereal Disease Section of the Centers for Disease Control told you the reason they are not trying to identify who has AIDS in New York City is that there isn't enough money in New York to treat everyone who has it now.

Monteith: That's true. Curran is an

honest man. He is concerned about the fact that there is little being done to stop the spread of the disease. But one man on his own can't change much.

CTC: What predictions are being made about AIDS?

Monteith: The Hudson Institute in Indianapolis predicts that by the year 2002 there will be 14.2 million Americans infected with HIV if we continue to refuse to bring the epidemic under control. The media ignored their prediction.

Professor William Haseltine, professor of medicine and public health at Harvard University, said in the January 1993 *Priorities* magazine that he predicts 100 million people worldwide will be infected with HIV by the year 2000. That is 100 million who will eventually die. His prediction is also being ignored by the general media.

CTC: The Sentinel Hospital Study from 1989 to 1991 found that 4.7 percent of persons entering their hospitals were HIV positive. But the study was anonymous so even those persons who had the disease were not told they were infected and could go on to spread it.

Monteith: They tested people entering about 20 hospitals across the country. Those 4.7 percent results are in the Aug. 13, 1992, *New England Journal of Medicine*. It reflects where the virus might be in the general population.

In 1990, 2.3 percent of the people entering those hospitals were HIV positive and, by 1992, 4.7 percent were positive. So, it had doubled in two years.

In Washington, D.C., they did a study of men from the general population entering the Sentinel Hospital in that city. They tested men aged 25 to 44 and found over 11 percent of white men and over 16 percent of black men were HIV positive.

CTC: The San Francisco Cohort study of a group of 6,700 homosexuals in San Francisco from the early 1980s to 1988 found that 76 percent of the cohort was infected with HIV by 1988. What is the figure for 1993?

Monteith: I don't know, because they stopped testing when 76 percent were infected.

This was a study sponsored by the Department of Public Health in San Francisco, but you won't read about it because they keep it hush hush. It didn't make their safe-sex efforts look successful.

In 1991, the San Francisco Department of Public Health carried out another study — the "Young Men's Survey" — in San Francisco because they wanted to show what a great job they were doing with condom education. They canvassed young men ages 17 to 19 in homosexual bars and dance clubs

Interview by Mary Arnold

...were just entering the homosexual lifestyle.

They found that 14.3 percent were already HIV positive and 23.8 percent were hepatitis B positive. They published these findings in a June 4, 1991, report. But they won't send the report out anymore, and they pretend it doesn't exist. I have tried calling them to get extra copies, and they say they have never heard of it.

The figures are devastating, and one must pity these poor young men.

CTC: Your book says that HIV is not usually picked up by casual contact. But you do stress that health-care workers are at risk. I was interested in the "splash cases" where three women, handling infected blood, splashed the blood on their skin and were subsequently diagnosed as HIV positive. You say they got the virus through their intact skin. Most people tend to think you need wound-to-wound contact.

Monteith: Yes, there are instances where people have been infected through intact skin. I think it's rare, and it's hard to get it that way, but it can happen. The virus can go through intact skin like the skin of your face or finger and especially through the lips and mucous membranes of the mouth.

Even Dr. Anthony Fauci from the Na-

tional Institute of Allergy and Infectious Diseases made the mistake of saying on a Ted Koppel TV report in 1987, "You don't get AIDS by getting blood splashed on your skin — you just get infected with the virus."

Well, everyone knows that the virus leads to AIDS.

CTC: How does it enter through intact skin?

Monteith: If the virus is present on the skin, it can enter through the Lan-

gerhans cell which lies in the subcutaneous tissue of the skin.

You know that when you wear a patch behind your ear for seasickness, the medicine enters through the skin. Women wear hormone patches on their skin so the hormones enter through the intact skin.

Well, it's a similar thing. It's a tiny virus, only a tenth of a micron in size; so,

it can enter through the skin. I would stress that there is minimal chance of getting HIV this way. But it can happen, and people should be allowed to know that it can happen.

CTC: What do you say about casual spread of the disease?

Monteith: AIDS is a hard disease to get. It is usually not spread by casual contact.

Nevertheless, there are 90 children in this country who have AIDS, and no-

Professor William Haseltine predicts 100 million people worldwide will be infected with HIV by the year 2000.

body knows how they got it. Both parents are HIV negative, there was no sexual abuse or drug use, and there is no clear understanding of how these kids got it.

Similarly, the Russians have been carrying out an epidemiological study to try to find out how 21 mothers who were involved in caring for their children with AIDS also contracted the disease.

Recently, children in the town of Sverdlovsk in southern Russia became infected through use of an infected syringe in a hospital. It was spread to a total of 260 children. And, of the mothers involved in caring for their children in this group of 260 children, 21 mothers have tested HIV positive.

How did the mothers get it?

We don't know. There is speculation, but we don't know. There is a lot we don't know about transmission of the disease.

Similarly, the CDC says HIV can't be spread by respiratory means, and maybe it can't. But no study has ever been done to prove that.

Dr. Lorraine Day, a San Francisco surgeon, offered to do a study, but her efforts were blocked. Then the army offered to test chimpanzees to see if the virus could be spread by the respiratory route, and the CDC said we don't need a study.

But we do need to have a study so we can know for sure. How else can we protect the public?

CTC: You mention the push for national health, which, you say, is supported by the gay lobby so that AIDS patients can die in hospital beds at the nation's expense. You also quote a report by the Massachusetts Hospital Association predicting that the cost of caring for AIDS patients in Massachusetts would rise from \$20 million in 1987 to a quarter of a billion dollars within a 10-year period; the epidemic threatens to bankrupt Massachusetts. And you say AIDS will have a serious effect on this country's health industry by the end of the '90s.

Monteith: I'm not saying that we shouldn't look after our AIDS patients, because we have a moral responsibility to do that, of course. But wouldn't it be cheaper to try to stop the epidemic?

In the first six months of this year, 59,000 new cases of AIDS were reported. Yet, still, all we get from government is the same old thing — condoms and sex education and needle exchange, and it's not working.

CTC: What can people do to try to influence the nation's health agencies to bring the AIDS epidemic under control?

Monteith: People should write to their representatives and demand that HIV/AIDS be treated as a disease and not a civil-rights issue and that standard public-health measures begin to be used. They should also state their opposition to "safe sex" education for their children.

But it's not an easy battle. Even President Reagan tried in 1987 to get Health and Human Services to test a requisite sample of the American population for the virus, and it never happened. His order was ignored. The president and his staff wanted to influence the handling of the epidemic, but they were thwarted.

(Stanley Monteith, M.D., will be Human Life International's keynote speaker at its April conference in Irvine, Calif. For a copy of AIDS: The Unnecessary Epidemic, write to: AIDS Book, 618 Frederick St., Santa Cruz, Calif. 95062. The price is \$14.95 plus \$2 handling.)

Mary Arnold is a CATHOLIC TWIN CIRCLE contributing writer.



In the first six months of 1993, an estimated 59,000 new cases of AIDS were reported; condoms, sex education and needle exchange programs just aren't stopping the deadly disease.

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