

AIDS EXPERTS RECOMMEND PROTECTIONS AND COLLABORATION FOR TESTS OF PREVENTIVE VACCINES

The search for a preventive HIV vaccine may depend as much upon the implementation of extensive social and behavioral research, social safeguards and collaboration

among government agencies as it does on scientific breakthrough, a Washington conference concluded recently.

"The testing of an HIV vaccine presents unprecedented

challenges, and will test our will, our creativity and our ability to reach across our differences toward a common goal," said conference organizer Derek Hodel. Hodel is the treatment

issues director of AIDS Action Council.

The May 9-10 conference, sponsored by the Washington-based AIDS Action, drew nearly 300 participants and issued a

40-page report—HIV Preventive Vaccines: Social, Ethical and Political Considerations for Domestic Efficacy Trials—with over 50 recommendations.

"For communities at great risk of contracting HIV, we are as desperate for a vaccine as we are for a cure," says Hodel. "Our recommendation will provide the foundation for a successful partnership among government, industry, academia and the communities most affected by HIV," Hodel said.

Thousands of volunteers of all racial and ethnic backgrounds, sexual orientations and lifestyles will be needed to test prospective vaccines.

Trial planners face many difficult issues. For instance, researchers must provide risk-reduction counseling to participants, but that may make it more difficult to detect how well the vaccine works.

On the other hand, participants may believe they are protected from HIV and might increase their risk-taking.

There are also concerns that trial volunteers may be subject to discrimination as a result of the continuing stigmatization of AIDS.

In the wake of continued allegations of past biomedical injustices, careful planning and community involvement are key to the testing of AIDS vaccines. Many of the communities most affected by the AIDS epidemic are among society's most vulnerable to discrimination—communities of poor people, gay men, drug users and people of color.

Conference speakers included Dr. William Paul, head of the Office of AIDS Research at the National Institutes of Health, Dr. June Osborn, former chairwoman of the U.S. Commission on AIDS, National Institute of Allergy and Infectious Disease head Dr. Anthony Fauci, Dr. Robert Fullilove, a community health specialist and behavioral researcher at Columbia University, James Jones, author of *Bad Blood* (a history of the Tuskegee Syphilis Study), and more than 40 other experts on AIDS and on bioethics.

AIDS Action Foundation fights the AIDS epidemic by ensuring informed public policy on HIV/AIDS through policy research, education and information dissemination. It works in concert with AIDS Action Council.

HEALTH

HEALTHWIRE NEWSBRIEFS

AIDS CASES RISE DISPROPORTIONATELY AMONG AFRICAN AMERICANS & LATINOS

The Federal Centers for Disease Control and Prevention (CDC) report that AIDS cases more than doubled last year under a broader definition of the disease — showing a dramatic increase in infection among heterosexuals. The CDC expected the new definition to increase the number of cases by 75% but found that the number of new cases had jumped by 111% instead. The increase was greater among women (151%), African Americans (102%), and Latinos (123%). Data for Native Americans and Asian Americans was considered unreliable because of the small number of cases reported. Other CDC data showed that for women the most dramatic rise in cases was among African American women in the South. FOR MORE INFORMATION CONTACT: Tom Skinner, CDC Press Office, 404-639-3285.

Hopkins Medical School in Baltimore, M.D. by Dr. Richard Chaisson, showed that obtaining quality AIDS treatment is extremely difficult for people of color. Dr Chaisson's study looked at African Americans and whites with identical HIV status who were applying for admission to a Johns Hopkins AIDS treatment program. He found that 63% of the white applicants had been given AZT (the most effective AIDS drug available) by their physicians, while only 48% of African American applicants were being treated with the drug. Further, when examining the applicants usage of other drugs designed to extend the lives of AIDS patients by preventing infections, Chaisson found that 82% of the white applicants were receiving preventive drug therapy, compared with only 58% of the African Americans. Since all applicants surveyed agreed to receive the same type of drug treatment once they were admitted to Johns Hopkins, Dr

Chaisson said that he could only conclude that "there really is a racial difference in how physicians are treating people."

While the study only reviewed patients in Baltimore, similar treatment discrepancies have been found in New York State programs. In New York, African Americans and Latinos were less likely to be enrolled in state-controlled AIDS treatment services than whites. FOR MORE INFORMATION CONTACT Dr. Richard Chaisson, Johns Hopkins Medical School, 410-955-1754.

PROMISING NEW TREATMENT FOR SICKLE CELL PAIN

The work of Dr. George Buchanan of the University of Texas Southwestern Medical Center in Dallas and Dr. Timothy Griffin of Cook-Fort Worth Children's Medical Center has led to a new and more effective treatment for the acute pain associated with Sickle Cell Disease (SCD). The study

examined the responses of 36 children and adolescents with SCD through 56 acute episodes of pain severe enough to require hospitalization. Instead of being treated solely with morphine or other narcotic pain relievers, the children were given a mixture of morphine and methylprednisolone — a corticosteroid which is an anti-inflammatory drug already used to treat arthritis pain.

The combination SCD treatment reduced the duration of the patient's painful episodes and shortened their hospital stays by one-third. The treatment, however, does cause some side effects. Dr. Buchanan noted that some of the patient's had recurrences of pain soon (See Health Briefs, Page 23)

STUDY INDICATES DISCRIMINATION IN AIDS TREATMENT

A study, conducted at Johns

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