



Vancouver PWA

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Newsletter

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S. M. M.

PWA: A SOCIETY BASED ON SELF-HELP

"The Vancouver Persons With AIDS Society exists to enable persons living with acquired immune deficiency syndrome and human immunodeficiency virus to empower themselves through mutual support and collective action.

From our personal struggles and challenges come our courage and strength."

In accordance with our society "mission statement" stated above, our Program Committee is now the Support Committee. Contrary to the concept of a service-oriented organization, we implement projects to complement the needs of our members not already met by other agencies. The mutual support given by these projects is only possible, thanks to you - the members and the caring people who come forward as volunteers to form the collective action part of the formula to make our society prosper. All we ask of you is a few hours a week and a commitment to carry out your assigned duties. If you wish to discuss volunteering call Tom M. [volunteer co-ordinator] at our office. You can make a difference.

Tom M.

AIDS VANCOUVER ELECTS NEW BOARD

At the AIDS Vancouver Annual General Meeting, held Tuesday, May 28, members of the Vancouver AIDS Society voted in the Board. It includes 16 dedicated individuals with a variety of backgrounds and areas of interest.

The new Board members, elected to two-year terms are: **Michael Doyle** (Project Leader of Persons With AIDS Society Peer Counselling Program and former Director of Education of AIDS Community Care in Montreal); **Francisco Ibanez** (AIDS Vancouver "Man to Man" volunteer and Simon Fraser University graduate student in Education); **Doug McArthur** (AIDS Vancouver HelpLine and Office support volunteer); **Deborah Mearns** (President of Vancouver Native Health Society, Member of B.C. Medical Association Committee on Aboriginal Health, B.C. AIDS Network member, and lawyer); **Scott Robertson** (Social worker, PWA Society volunteer, B.C. Self-Esteem Network volunteer, and B.C. AIDS Network member); **Dr Richard Taylor** (physician); **John Turvey** (Coordinator of Downtown Eastside Youth Activities Society, which runs the Needle Exchange Program); **Pam Weeks** (Psychotherapist and consultant for Sport Canada on gender equity program);

They join existing Board members **Richard Brail** (lawyer), **Judy Capes** (Vancouver Public Library Deputy Director), **Tom Ciz** (chartered accountant), **Bill Coleman** (registered psychologist), **Margo Murphy** (educator), **Veronica Prescott** (marketing and planning consultant), **Richard Ryan** (retired administered and educator), and **Terry Twentyman** (flight attendant and union representative), all of whom will be continuing on the Board. Capes was voted President and Chairperson of the Board.

Mark Mees, AIDS Vancouver's Executive Director, says: "I am personally very excited about the new Board. They will be a very provocative, energetic, and politically powerful group of people."

For more information, call Mark Mees at 687-5220.

LETTERS TO THE EDITOR

Dear People:

Recently, Mr. Barry Budway of the PWA Society spoke to my Grade seven students at Sir Sandford Fleming Elementary, in Vancouver.

His presentation was strong and direct. His impact on my students, I'm sure, will be long-lasting.

My AIDS education unit was immeasurably enriched by his presence.

Please accept this cheque as a small token of thanks.

The eloquence which has appeared so often during the past decade, from People With AIDS, is amazing.

With thanks, sincerely,

Mr. Dale Essar

DENTAL TREATMENT GUARANTEED

The Society recently received a letter from Brian N. Rocky, D.M.D., Registrar of the College of Dental Surgeons of British Columbia. In response to a complaint concerning several dentists who have possibly refused dental care to a PWA, Dr. Rocky states, "It is improper for a dentist to decline dental care to a patient that has HIV, and any individual dentist who does so, does not have the support of the profession in this matter."

He is in the process of contacting each of the dentists mentioned above with regard to this matter and is requesting reports from them, along with undertakings to insure that dental care will be provided by them to any patient with HIV.

If anyone is denied treatment due to HIV by a dentist, get in touch with our Advocacy Committee. Tom M.



On May 30, 1991, the PWA office was honoured by a visit from Her Excellency, Mrs. Gerda Hnatyshyn, wife of the Governor-General of Canada. Mrs. Hnatyshyn was given a tour of the office by our President, Rick Waines, and Vice-President, Pei Lim and then met with a group of HIV+ women. L to R: Rick Waines (PWA President); Carolyn Hafner (volunteer for Women and HIV/AIDS Support Network); Her Excellency Mrs. Hnatyshyn.

NEWSLETTER IMPROVEMENTS

You may have noticed that your newsletter has a new look. We have been changing to 100% recycled non-bleached paper in a variety of colours over the past few months.

We'd like to make some changes in the content too, and here's how you can help. We want more short articles including daily life, humour, helpful hints, recipes, in short, articles to share experiences, joys and difficulties of living as a PWA. We'd also like illustrations to enhance the aesthetics.

Please get your article to us before the first Friday of the month.

Yes, we are going to reestablish publication on a regular schedule even with this late issue, so please try to get your articles in by deadline. We hope to improve our services, but we need some help from you to make the newsletter more interesting and better connected to the lives of the PWAs for whom it is produced.

Douglas Starratt, Editor, Vancouver PWA Newsletter

NOTICE TO PEOPLE TAKING DDI OR DAPSONE

People taking ddI, who are also taking Dapsone to prevent PCP, should be aware of the following:

Studies of patients' records have shown that some people who take **Dapsone and ddI** simultaneously, have developed PCP. If Dapsone and ddI are swallowed at the same time, the Dapsone may not be properly absorbed.

Jacobus Pharmaceutical Company, which makes Dapsone, has issued a letter recommending that all people on Dapsone take it:

2 hours before taking ddI or 2 hours after taking ddI.

If Dapsone is taken 2 hours before or after ddI, it should work as well as it usually does.

In theory, the following drugs may also not work as well if they are taken simultaneously with ddI, although this is not known for certain:

Ketoconazole (Nizoral)

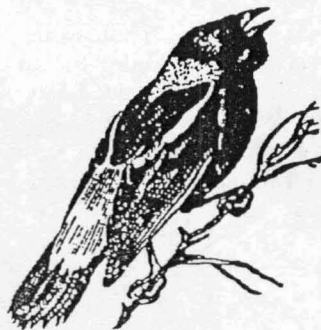
Itraconazole

Pyrimethamine

Trimethoprim (which is found in Bactrim and Septra)

These drugs, like Dapsone, require an acidic environment in order to be properly absorbed, and the alkaline buffer in ddI may neutralize the natural acid in the stomach. People taking Dapsone or any of these drugs should talk with their doctor about taking them 2 hours before or after ddI.

AIDS Treatment Resources, Inc.



AIDS TREATMENT HIGHLIGHTS

BI-RG-587: ACT UP URGES FASTER EFFICACY TRIAL

On April 11, ACT UP/Golden Gate in San Francisco wrote to the Primary Infection Committee of the ACTG (AIDS Clinical Trials Group, funded by the U.S. National Institute of Allergy and Infectious Diseases) urging an immediate trial to test BI-RG-587 in comparison with AZT, and with the combination of these two drugs. Jesse Dobson of ACT UP had heard that such a study might be delayed until BI-RG-587 could be tested with ddI, so that a number of combinations could then be tested together - the cleanest way scientifically to run a study. The point of the letter, and of separate demands by ACT UP/Golden Gate, was to urge that the testing of BI-RG-587 with AZT go forward now, and not wait for dosage data on combining the drug with ddI.

After the letter was sent, activists learned from sources within Boehringer-Ingelheim, the drug's developer, that no more than twelve people have yet received BI-RG-587 - and none of them has received more than a single dose. The comparison with AZT could not be started yet because, under the current drug-development system, a dosage safety trial of BI-RG-587 needs to be done first. Activists are surprised and disappointed that a dosage trial has not yet been conducted.

Laboratory and animal data on BI-RG-587 was published last December in *Science*. However, the drug to be tested in clinical trials is apparently not the same as the one published there, but a chemical variant of it. The delay in trials might have been caused by changing the drug to a new one, presumably believed to work better. On the other hand, it is common for pharmaceutical companies to present or publish data on their second-best drugs, keeping the best ones secret. If that happened here, the delay would be unlikely to be due to a late change in drugs.

Activists suspect that the delay in trials may be caused by coordination difficulties within one

or more of the government agencies involved with this drug. This example suggests that even for the most promising treatments, the system cannot be trusted to work by itself, without consistent oversight.

John S. James, AIDS Treatment News, San Francisco

DDC STUDY RESULTS

DDC has been available through the manufacturer, Hoffman LaRoche, through an expanded access program since June 1990. It is also widely available through local buyers' clubs including the Los Angeles Buyers' Club.

Because DDC is a synthetic nucleoside analogue, it exerts its antiviral effect by inhibiting the action of reverse transcriptase in the HIV life cycle. In the past three years, clinical trials have tested the activity of DDC and have shown it to be a potent inhibitor of HIV replication (in the test tube). This activity has also been shown in patients with AIDS and ARC, especially those who have developed strains of HIV resistant to AZT.

AZT can cause serious side effects on the bone marrow which decreases production of the red blood cells, causing anaemia, as well as other nonspecific side effects like nausea, headaches and fatigue. DDC on the other hand has many fewer side effects. The most serious one, and normally only at high dosage, is a sensory neuropathy (painful numbness in the hands and feet). This is usually reversible upon discontinuance of the DDC. Other side effects are oral ulcers and skin rashes which eventually resolve after several weeks without stopping the DDC. Much less frequent are elevations in some liver enzymes (SGAT and SGPT) and a decrease in the platelet count.

Some patients in the initial study have been on DDC for over two years without development of any significant side effects. This has also been true over the past four months for the 45 patients enrolled in our Hoffman LaRoche sponsored study. Patients are randomly assigned to either one of two

dosage schedules. The low dose consists of one tablet (0.375 mg) three times a day for a total dose of 2.25 mg.

We present here the first results for twenty-seven patients who have completed three months of uninterrupted DDC. None of them were on AZT. In patients who started DDC with T4 counts of less than 100, seven of eleven had further decreases in their T4 counts. Five of these were on the low dose of DDC and two were on the high dose. Significantly, six of these seven patients were quite ill during this period (including being hospitalized). However, they were able to stay on the regimen of DDC throughout this period. Two of the seven had decreases in the p24 antigen levels (an indicator of HIV replication), both on the low dose. One patient had an increase in the p24, also on low dose. The other four people were p24 antigen negative at the start and remained so.

In patients with initial T4 counts greater than 100, but less than 300, 10 of the 11 had increases in T4 counts (up to 286 in one patient). Seven of these were on high dose and three were on low dose. Four of the eleven had decreases in p24 antigen levels. Three of these patients were on high dose and one on low dose.

In patients with initial T4 counts between 300 and 500, three of the five had further increases in their T4 counts (one high, one low dose). All patients were p24 antigen negative and remained so throughout the period.

In summary, the greatest positive changes occurred in the patients whose initial T4 counts ranged from 100-300. In this group 91% of the patients' T4 counts increased and 36% of the patients' p24 antigen levels decreased. The high dosage comprised 70-75% of the positive changes (T4 and p24) seen in this group. In the patients who started with less than 100 T4 cells, 63% continues to have a decline in T4 cells. The p24 antigen decreased in 18% of the patients. Although overall the numbers were small (only eleven in each subgroup), the most beneficial results occurred in patients with greater than 100 T4 counts taking high doses of DDC.

Combination therapy using more than one antiviral agent has become more and more popular. Combination of AZT and DDC has been well tolerated in several centres where studies are now

under way. Combination therapy at lower dosages decreases the overall toxicity (side effects) and reduces the likelihood of developing resistance. In the treatment of other diseases, such as tuberculosis, multiple drugs are used to overcome the problems of toxicity and drug resistance. This is also becoming true in HIV disease where combinations of many different drugs is becoming standard therapy.

Gary P. Jacobs, MD, Immune Suppression Unit, Hollywood Community Hospital

COMPLEX HOMEOPATHY

Homeopathy is a medical treatment method which began in Europe over 150 years ago. It is currently used extensively throughout the world, but little in North America (where drug therapy is the most common medical treatment). It is interesting to note that homeopathy was a major medical discipline in North America until early this century when it was replaced by a growing pharmaceutical industry. Homeopathy is a popular alternative to drug therapy in Europe and Great Britain. (The Royal Family are openly supportive of this practice).

Homeopathy is based on the "Law of Similars". This means giving the patient, in weak and infinitesimal doses, the substance which, if administered to a healthy subject, would cause symptoms similar to the patient's own symptoms. For example, epecacuana when given in large quantities will produce nausea and vomiting in a healthy person. The same substance when given in very small doses will cure the patient of nausea and vomiting. Even some conventional therapies use the law of similars. For example, digitalis causes rapid and irregular heartbeats when given in large doses. However, in small doses, digitalis is used to treat patients with a rapid and irregular heart rate.

Homeopathic remedies are natural substances (plants, animal products, minerals, etc) which act to stimulate the body's healing capacity. This is similar to the use of vaccines and similar to the use of allergy serums. This is opposite to therapies which suppress symptoms in the body.

Complex Homeopathy Continued

Classical Homeopathy is based on the use of single homeopathic remedies of often high dilutions. They usually cause a "healing crisis" i.e. an aggravation of symptoms for several days following administration.

Complex Homeopathy is a modern revision, which uses combinations of herbal and low potency homeopathics in one remedy to provide a broader stimulatory action and also to minimize the "healing crisis" aspect. This is further refined by the use of Electro or Diagnostic Techniques to further individualize treatment for each patient in order to optimize benefits and minimize side-effects.

Any adverse effect is usually minor and does not cause any permanent symptom or damage. If the adverse effect occurs in the first few days of treatment and it is mild, then it is best to persevere for a few days to see if it subsides. If it subsides, continue treatment. If it does not subside, discontinue and return for retesting.

It is best to use one amount of the prescribed complex homeopathic only. When finished, you will be retested to see whether more (or a different one) is required.

An advantage of Complex Homeopathics is that they are usually required for only a couple of months. After that the body has been sufficiently stimulated that it will no longer require active treatment.

Our experience is that the Complex Homeopathics are "fine-tuning" only, and are not usually effective unless the "major tuning" of life style and dietary changes have already been implemented.

When taking homeopathics, it is important to avoid alcohol, caffeine, nicotine, menthol, and camphor products since these items can "block" the stimulatory effects of the homeopathics.

Our Library now has an updated edition of Dana Ullman's "Homeopathy: Medicine for the 21st Century." It is called "Discovering Homeopathy: Medicine for the 21st Century." This updated edition now includes a new chapter on the homeopathic treatment of HIV/AIDS and an update on research. Handouts of the new chapter on HIV/AIDS homeopathic treatments are available on request.

HOMEOPATHIC FORUM

A forum on Homeopathy will be held at Gordon Neighbourhood House on Wednesday, July 3 at 7:00 pm. The guest speaker will be Dr. Neil Tessler, Naturopathic Physician.

INFECTION FIGHTERS

Infection by the parasite *T. gondii* [Toxoplasma gondii] is a frequent cause of life-threatening infections in people with AIDS. This organism infects the central nervous system [the brain and spinal cord], causing toxoplasmosis [commonly called toxo]. Infection by *T. gondii* can result from eating contaminated, improperly-cooked meat or by ingesting cat faeces. The toxo parasite can also be transmitted from mother to fetus. The standard treatment consists of the drug combination pyrimethamine and sulfadiazine; patients who are allergic to sulphur drugs can be given the antibiotic clindamycin instead of sulfadiazine. Since, as in many other diseases seen in AIDS, relapse is common, maintenance therapy is needed. At this time, the best preventative or prophylactic regimen is uncertain, so doctors and their patients are experimenting with combinations of drugs to find the optimal treatment and prophylaxis. Drugs under investigation include pyrimethamine with or without sulfadoxine, sulfadiazine or clindamycin, and lately, the combination of pyrimethamine and dapsone has been thought to offer protection from latent toxoplasma infection. There is also the possibility that agents such as Chinese herbs, 566C80, and tetracycline may also be candidates for prophylaxis.

The standard therapy for toxo is pyrimethamine with a sulphur drug, which although effective, often has adverse effects in patients with AIDS. Physician/investigators at

Hopital Claude Bernard and Hopital Saint Louis [Paris] have been experimenting with various drugs to find potential alternatives to standard anti-toxo therapy. Sulfone-type drugs such as dapsone have strong anti-toxo effects in animal studies, and in patients with AIDS, dapsone appears to be easily tolerated. French researchers have used dapsone in a number of experiments, and their results suggest that it may be useful for treating toxo.

In experiments with human cells infected with *Toxoplasma*, treatment with dapsone resulted in a reduction in the number of parasites inside the cells. When dapsone was used with pyrimethamine, an even greater decrease was seen in the number of toxo parasites. Moreover, combinations of the two drugs resulted in physical damage to the parasite. In animal experiments, treatment with dapsone prolonged survival in infected mice compared with untreated infected mice. It appears that dapsone by itself does not prevent the spread of the parasite. This is not surprising, as dapsone does not kill toxoplasma, but only retards its growth. Combinations of dapsone and pyrimethamine resulted in a dramatic reduction of parasites in the various tissues [lungs, brain] of mice. Although parasites could not be detected up to 15 days after therapy was stopped, relapses occurred later. According to French investigators, dapsone-pyrimethamine delayed relapse better than pyrimethamine-sulfadiazine did. The investigators consider either combination of equal effectiveness in treat attacks of toxo. However, pyrimethamine-dapsone may be superior for prophylaxis.

Using the antibiotic doxycycline, researchers at the University of Geneva have been conducting experiments on mice against a virulent strain of *Toxoplasma*. In cells infected with the parasite, doxycycline reduced the replication of *Toxoplasma* and was as effective as pyrimethamine or pyrimethamine with sulfadiazine. High doses of doxycycline were not toxic to these cells.

More mice recovered from toxoplasmosis if treated with doxycycline on a twice-per-day schedule rather than only once per day. When pyrimethamine was used with doxycycline, the cure rate increased. Pyrimethamine and sulfadiazine were superior to either schedule of doxycycline when it came to the survival of infected mice. All

infected mice treated with pyrimethamine and sulfadiazine survived. Pyrimethamine by itself did not prevent the eventual death of infected mice.

In humans, 200 mg of doxycycline twice per day results in blood levels which are slightly lower than needed to cause 50% inhibition of the metabolism of toxoplasma. The concentration of doxycycline remains elevated in the blood 4 to 6 times longer than it does in mice. The relatively short circulation of doxycycline in the blood of mice may have accounted for the disappointing results seen with the once-per-day dose of that drug. The exact mode of action against toxoplasma by doxycycline has not been established. Doxycycline is used as prophylaxis against malaria and is considered one of the safer tetracyclines to use in humans. Perhaps doxycycline in combination with pyrimethamine could be used in controlled trials to determine its efficacy as prophylaxis against toxo in people allergic to sulfadiazine.

At the VI International Conference on AIDS in San Francisco, one abstract reported on the clinical use of doxycycline for treatment of toxo. Doctors at the Elmhurst Hospital Centre [Elmhurst, New York] reviewed the charts of patients with AIDS who used doxycycline for at least 1 month as an alternative to pyrimethamine-sulfadiazine. These patients were all allergic to sulfadiazine. Six patients were treated with oral doxycycline [100 mg twice per day]. In 5 subjects, signs of toxoplasmosis returned, which were confirmed by "ring enhancing lesions" seen on CT scans. Three of the 5 recovered when re-treated with pyrimethamine-sulfadiazine.

In light of the Swiss research, perhaps it is not surprising that these patients relapsed --their dose of doxycycline was only half that needed to cause significant inhibition of the parasite. Like aerosolized pentamidine, doxycycline-pyrimethamine might be better suited for prophylaxis for treatment of the particular infection.

TreatmentUpdate #21

WE'RE OPEN

**Mondays to Fridays 10 am to 5 pm,
Saturdays 11 am to 3 pm.**

PWA Office (except Saturdays and Holidays), drop-in living room lounge, peer counselling, library resource centre. Juice, freshly brewed coffee and other goodies when available. Library resource centre open: books, periodicals, audio and video cassettes, reference material, treatment/drug info. Peer counselling available, no appointment necessary. Call us at 683-3381 for info. Requisitions for Complementary Health Fund (CHF) refunds will be ready by 3 PM if in by 11 am, weekdays.

Other Programs/Support Services Available:
Blood Testing: call PWA for info. and pre-testing counselling. Applications available at PWA Reception desk.

Clothing/Furniture Exchange: call Harry or Jackie for info.

Complimentary Performance Tickets: call Jackie for availability.

External Relations: call Mary or Don.

Help Line: 687-4792, to talk to a Peer Counsellor. Collect calls accepted.

Housing Rental Subsidy: application forms available at PWA Reception desk. Call Phillip.

Loan Cupboard: ambulatory aids available. Wheelchairs, walkers, canes, also limited medical supplies. Sponsored jointly by AIDS Vancouver and PWA. Call A/V's Client Services 687-5220.

Massage Therapy: free for full members. Call Bart Malone 872-4323 for info. and location.

Moving?: leave message for Kay or Brian S.

Peer Counselling: call Michael D. for info. on future training sessions.

Personnel Committee Meetings: Call Lim or John

Retreats: call Tony or Barry B. at PWA for info.

Speakers' Bureau: Call Joe F. or Barry B. to join or to arrange for speakers.

TDD (for the hearing impaired) 683-3381

Walk For AIDS: 688-WALK (688-9255)

Treatments Project: Call Stacey or Arn.

Walk for AIDS Walkathon '91: Sunday, September 29th, Stanley Park. Call Greig or Garry at 688-WALK (688-9255). Call Tom M. at PWA to volunteering.

Volunteer Intake: call Tom M. at PWA for appointment.

M O N D A Y S

Hairstyling: Free for full members at PWA offices. Mondays, 10 AM to 3 PM. Sign-up sheet and date's availability on PWA living room lounge's bulleting board. Facilitated by professional hairdressers. Please come with freshly washed hair.

Advocacy Committee Meeting: All Society members welcome. PWA boardroom, Mondays, 2 PM sharp. Meeting on June 24, July 8 and 22, August 19. For info. call Rick at PWA. Deals with access to treatments, human rights, political and legal issues within other matters. Services include external and media relations, speakers' bureau, drug treatment/trial info., medical forums, etc.

Finance Committee Meeting: All Society Members welcome. PWA boardroom, Mondays, 2 PM sharp. Meeting on June 17, July 15 and 29, August 12 and 26. For info. call Harry or Managing Director at PWA 683-3381. Ensures proper financial procedures, recommends funding proposals, etc. Services include business management, office administration, fundraising, Walk For AIDS (walkathon '91) project, etc.

Therapeutic Touch Sessions: Free for full members. PWA boardroom 6 - 8 PM. Available June 17 and 24, July 8, 15, 22 and 29, August 12, 19 and 26. By appointment only. For info call PWA. Sign-up sheet at PWA Reception desk.

Native And Friends Body Positive Support Group: All welcome. Drop-in at PWA living room lounge, Mondays 5 - 7 PM. Available June 17 and 24, July 8, 15, 22 and 29, August 12, 19 and 26. Sponsored by the "Healing Our Spirit Aboriginal AIDS Prevention Society" and PWA. Call Tom 876-0944 c/o I.H.A. for info. For those Natives testing HIV+ and friends, an informal and confidential discussion group.

Buddy Support: For Buddies of PWA's. Sponsored and held at AIDS Vancouver, 1272 Richards every second Monday 7 - 9 PM. Meeting on June 24, July 8 and 22. Call A/V 687-5220 for info.

T U E S D A Y S

Meditation Group "Living in Each Moment": Open to people living with HIV, friends and supporters. Tuesdays, 2 - 4 PM. Meeting June 18 and 25, July 2, 9, 16, 23 and 30, August 6, 13, 20, and 27. For info. and location call Kristin 872-0431.

Executive Committee Meeting: All Society members welcome. PWA boardroom, Tuesdays, same day as Board of Directors, 4 PM sharp. Meeting June 18, July 2, 16 and 30, August 13 and 27. For info. call Lim or Managing Director Chris Sabean at PWA. Co-ordinates the business of the Society, prepares agenda for Society's Board of Directors meeting.

Board of Directors Meeting: All Society members welcome. PWA boardroom, Tuesdays, 7 PM sharp. Meeting June 18, July 2, 16 and 30, August 13 and 27. For info. call Rick, Lim or Managing Director Chris Sabean at PWA. The Board receives reports and advice from Managing Director and committee chairs on current Society activities and passes required resolutions.

"Living With AIDS" Therapy Support Group: Open to persons with AIDS diagnosis. Sponsored by PWA. Duration: 8 weeks, next group starting in the fall. Call Jackie at PWA for info., location and registration.

Women and HIV/AIDS Support Group: For HIV+ women seeking info. and peer support. Drop-in held at #302-1720 Grant Street, 1st and 3rd Tuesdays, 7 - 8:30 PM. Call Jackie at PWA or 255-9848 (during drop-ins) for info. Children welcome. Se habla espanol!

W E D N E S D A Y S
Support Committee Meeting: (formerly Programs) All Society members welcome and encouraged to participate. PWA boardroom, Wednesdays, 11 AM sharp. Meeting June 26, July 10 and 24, August 7 and 21. For info. call Bryan W. or Support Manager at PWA. Develops and facilitates support services. Projects include retreats, support groups, blood testing, drop-in lounge, library resource centre, peer counselling and help line.

Chinese Medicine: For Society members. Consultations at PWA Boardroom, 2 - 7 PM. "Wait listed" sign-up register at Reception desk. Sponsored by PWA. Call Steve for info. Facilitated by a professional. By appointment only. Available June 19 and 26, July 3, 10, 17, 24 and 31, August 7, 14, 21 and 28. Partners of Persons with HIV/AIDS and Family; Friends of Persons with HIV/AIDS - Support Groups: All welcome. Sponsored by AIDS Vancouver. Groups meet separate at St. Andrew's-

Wesley Church (Burrard & Nelson) - rooms to be posted - 7:30 - 9:30 PM. Call Bridget at A/V 687-5220 or Joy Moon 299-4828 for info.

Healing Circle: For Society members. Sponsored by PWA, meets Wednesday evenings. Call Lela 689-8476 or Don 682-2989 for info., registration and location. NOT a drop-in group.

T H U R S D A Y S
Therapeutic Touch Sessions: Free for full members. At PWA boardroom 1 - 3 PM. Available June 20 and 27, July 4, 11, 18 and 25, August 1, 8, 15, 22 and 29. By appointment only. Call PWA for info. Sign-up sheet at Reception desk.

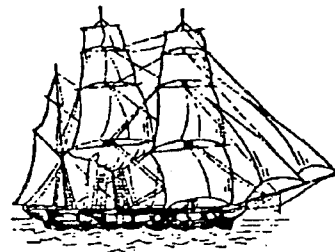
"Get Over It" AA Meeting: All welcome. Drop-in, 12-step program, at PWA living room lounge, 7 - 8 PM. Call PWA for info. Of special interest to HIV/AIDS concerned persons.

"Body Positive" Support Group: All welcome. Sponsored by AIDS Vancouver. Drop-in, at PWA boardroom, 7:30 - 9:30 PM. Call Ken Mann at PWA for info. For those testing HIV+, a confidential discussion group.

"New Hope" NA Meeting: All welcome. Drop-in, 12-step program, at PWA living room lounge 8:30 - 10 pm. Call PWA for info. Of special interest to HIV/AIDS concerned persons. NA 24-hour helpline: 873-1018.

"Coping with Loss and Grief" support group: All welcome. Sponsored by AIDS Vancouver. Alternate Thursdays 7:30 - 9 PM at St. Andrew's - Wesley Church's Education Centre (Burrard & Nelson). Call Joy Moon 299-4828 for info.

S A T U R D A Y S
Drop-In: Open to all members. Ideal for out-of-towners or those working weekdays. Library resource centre open. Peer counselling available, no appointment necessary. Drop-in held at PWA living room lounge, 11 AM - 3 PM. Call PWA for info. Juices, freshly-brewed coffee and other goodies when available.



KUDOS FOR THE MONTH

Big Ones, once again, to ESSO Station Davie & Burrard, Scribe & Scholar Stationery, Metropolitan Home, U-Frame-It Robson & Seymour, the Video Inn, Maritime Labour Centre and Simon Patrich Gallery for continuing to have our donation boxes permanently housed.

To Starbucks Coffee at 700 West Pender & Granville and ...for the Gourmet for their recurring donations of coffee and bread, respectively, for our lounge and members.

To the Vancouver Opera, Vancouver Men's Chorus, Arts Club Theatre, the Vancouver Symphony for continuing to supply complimentary tickets to their magnificent events for our members. This allows our members a enjoyable evening out on the town, which otherwise they could not afford giving them much needed entertainment away from home.

To G.A.L.A. North for continuing their donation of the proceeds of their dances to our Society.

To the hilarious Mr. Rusty Ryan who hosted the events, to all the wonderful entertainers who donated their talent and time, to the numerous local businesses which donated gift certificates or gifts for the greatest money maker "Chinese Auction" (only Rusty can explain you the rules) carried on twice nightly and to the staff, management and owner of Doll & Penny's Cafe for holding "A Tribute to those who have gone. A benefit for those who remain." AIDS benefit fundraiser at Doll & Penny's, sponsored by the West Ender weekly newspaper throughout May which our Society was part of. By the way we have enjoyed ourselves very much during the nights which we helped Doll & Penny's to carry on the evening.

Huge ones to Miss Brittaney for the donation of her great collection of stuffed animals for our members.

To Joseph Murphy of the Inuit Gallery who canvassed and to Joe, Derek, George, Nigel, Sheila, Dr. Paul, John, Lorne, Colin, Rick, Bill, Lilly, James, Nancy, Mary and Lee who contributed in the purchase of the beautiful Gund stuffed dogs for 20 of our members.

To Uniglobe Classic Travel of Burnaby for their professional services well beyond the call of duty.

To George who asked his friends to donate to our Society in lieu of gifts for his 50th Birthday celebrated on May 11th.

To Dave M. who also asked friends and family to donate to our Society for his birthday in lieu of gifts.

To the cast, orchestra, company and crew of Vancouver Opera's production of "Salome" at the Queen Elizabeth Theatre, as part of their Outreach/Educational programming, during their Student Dress Rehearsal programme, who donated money of which one-half was given to our Society.

To Terry at Papa's Lounge of the Royal Hotel for selling "Castle" T-Shirts on our behalf.

To the wonderful "COWBELLES", Celebrities Night Club, Loops Restaurant at Lonsdale Quay Market, the Pitt Gallery, Eighth Avenue Theatre Group and all others for their collection and fundraising efforts on our behalf.

To the many members of our Society and the community at large for their donations of used clothing and household furniture/appliances for our members under our clothing/furniture exchange.

Especially to Shirley S. for her donation of her electric scooter for the use of our members who are unable to get around on their own.

To the numerous members of the community at large for their donations and ongoing support.

To all our volunteers without whom we could not carry out our mission.

Harry, Finance Committee

HELMCKEN HOUSE OPENS

We wish to congratulate the McLaren Housing Society of BC on the opening of Helmcken House. The official opening was June 24, 1991 and the new residents will take possession of their suites on July 1, 1991.

FRIENDS TOGETHER

Recently my Montreal friend David came to join me for a Vancouver Island vacation. Instead, I was in hospital for nine of the eleven days he stayed, with what turned out to be non-Hodgkins Lymphoma. He was there for me through the diagnosis and initial chemotherapy. I was recovered enough to spend the last two days of his stay touring around Vancouver and saw him off at the airport.

Sad and depressing thoughts sort of crept in after he left, and I really missed his steadiness. Have to admit my positive, upbeat program got knocked apart for a couple days.

But I just got up, with a kinda pep-talk to myself: "So you've been feeling knocked back and dragged back and you've been moping around. So what! C'mon, look at your energy level and figure out what's possible instead of pouting about what you can't see yourself doing. I bet you can do a half hour on the seawall for health and exercise. Get up and dress warm, 'cause we're going out right now, at dawn."

And so we did, and I walked for ten minutes before I tired and sat down on a park bench, watching the approach of an older woman on a ten-speed. She sat down, pulled out a water bottle and offered some in a kind fashion. She started to talk, on the pleasant day, on how it was good to see people exercising and that her ten-speed was her exercise program. I explained my situation and learned she, too was dealing with cancer. We spent a good hour exchanging views on hope and healing, and I came away strengthened just to have met her.

Further down the beach, I met Noel Silver, who organizes Art Therapy classes for PWAs and we had quite an invigorating chat on the meaning of the art we do. I'm gonna do some more artwork and who up for his sessions, if I can.

Just getting up for a half-hour stroll turned my day around, so I'm gonna keep up with the walks. And I'm gonna talk my friends into joining me for one of the indispensable Vancouver experiences, strolling along the beaches.

Low energy? That's what park benches are for! I'll get there eventually, so if I can find someone to keep pace with me, it's just ideal. I like to just walk and talk and look at things along the way. Just friends together talking.

Douglas Starrat



PUPPIES

Joseph Murphy from the Inuit Gallery canvassed 20 supporters to purchase 20 thirty-inch, beautiful Gund stuffed puppies. With the help of Jackie, peer counsellors and Mark Redford, we placed all the dogs into deserving homes. Myself, I delivered the first 5 dogs to some of our members. It was a very touching, emotional experience. Some of our members are on their own and don't have the support that they need. The dogs were welcome, comforting friends. One of our members had lost his dog due to illness and had to put him down. It was a very devastating experience in his life. The Gund dog was very similar to the dog he had lost, and when he received the dog he was overwhelmed with emotions. It also gave me a chance to see some of the members who can't make it to the office any more due to their illnesses. Mark delivered the remainder of the dogs and experienced the same rewards as I did. We have received many heart warming thanks for the private donations from our members. The thought and caring that went into this project by Joseph and his donors made a difference in the recipients' lives by showing them that there are people who care.

Yvonne

WALK FOR AIDS

CALLING ALL WALKERS, SUPPORTERS, SPONSORS, VOLUNTEERS...CALLING ALL, CALLING ALL, CALLING ALL ... EVERYBODY AND EVERYONE ...

The VANCOUVER PERSONS WITH AIDS SOCIETY's "WALK FOR AIDS" Walkathon '91 project co-ordinator, Gary Gilbertson advises, that our Society's biggest yearly fundraiser has already been launched. The Vancouver Board of Parks and Recreation is pleased to permit the Society's Walkathon '91 to be held in Stanley Park on SUNDAY, SEPTEMBER 29TH (make a note in your personal calendar).

Gary informs us the project will be operating out of the Society's offices at 1447 Hornby Street (between Pacific and Beach), Vancouver, B. C., V6Z 1W8. It has a separate telephone number being 688-WALK (688-9255), Facsimile 683-3367. (Take note of these.)

As you all know, the walkathon is dependant on walkers, volunteers and last, but not least YOU AND I. Yes, YOU AND I. If you want to participate and help YOUR Society, yourself and your fellow PWA's, you can call or make an appointment to meet Gary and his team as soon as possible. He will be glad to give you more details and information.

Harry-Finance/Fundraising Committees



July 17th, 8pm
SFU Harbour Centre Campus
515 West Pender
Michael Callen
New York Coalition Founder
Flirtations Singer
Long Term Survivor
Will Share His Experiences
And Talk about his
New Book "Surviving AIDS"
Donations At the Door

A NIGHT WITH MICHAEL CALLEN

Michael Callen was diagnosed with AIDS in 1982 when most doctors believed that no one survived AIDS for much longer than a year.

Eight years later Michael is one of hundreds of long-term survivors alive and thriving. He has testified before Congress, co-created the P.W.A. Coalition in New York, and co-founded Community Research Initiative [a community based organization that tests promising drugs to fight AIDS].

Michael will tell his own story which is courageous, remarkable and sometimes outrageous. Please join us for a memorable evening on July 17th at 8 pm at the SFU Harbour Centre Campus, 515 West Pender. A singer of the "Flirtations", he will share his experiences and talk about his new book "Surviving AIDS". Donations at the door.

An Advocacy sponsored event.

GARLIC AND THE IMMUNE RESPONSE

Garlic has been used for centuries to treat a variety of human ills. More and more research is being published about garlic; over 1000 references have been published in the last 20 years alone! Let's take a look at some selected articles.

The benefits of garlic appear to be related to the "sulfhydryl" compounds it contains. These sulphur containing compounds have demonstrated a wide variety of beneficial actions in the body. Incidentally, it is these same compounds which lend garlic its pungent odour!

Research in a clinical setting in China in the 1970s showed that immune cells were more active in patients being fed garlic juice. In animal studies, mice injected with a garlic extract demonstrated an increase in immune cell production and function. When a garlic poultice was applied externally to rabbits, there was a demonstrable increase in immune cell production and function. A poultice is crushed garlic placed directly on the skin and covered with a bandage for a period of time.

This doctor has regularly used garlic and onion poultices for sinus and middle ear infections as well as tonsillitis, with great success. I have also used garlic internally to help with lung and gastrointestinal problems.

The Chinese have used garlic preparations to treat dysentery and parasitic worms. Injections of garlic extract have been a treatment for meningitis, typhoid and paratyphoid. Garlic soup is an old treatment for pneumonia and inhalation of garlic vapour has been used to treat whooping cough. Garlic poultices have been applied to the lower right abdomen to treat acute appendicitis successfully.

In the *Journal of Oncology*, researchers have demonstrated, in a pilot study involving 10 AIDS patients, that garlic supplementation for 12 weeks had a notable effect. There was an increase in natural killer cell activity and the helper/suppressor cell ratio increased.

The National Cancer Institute is reported to have started a research project into the cancer fighting abilities of garlic.

Garlic also appears to be able to suppress candida albicans, the organism responsible for thrush and other yeast infections. Dr Adetumbi found that garlic stops the growth of candida albicans by preventing formation of fats necessary for the cell membrane to form.

In *Phytotherapy Research*, a research study demonstrated that garlic does boost the immune system. Garlic has also demonstrated anti-tumour properties in several studies. Garlic also protects against the conversion of nitrites to nitrosamines, which are carcinogenic substances.

To date I have not found any consensus of opinion as to what amount of garlic is considered beneficial. Crushed garlic can burn delicate tissues of the mouth, throat and stomach if too much is used. The sulphur containing compounds are generally unstable and they may change with processing so the nutritional value of garlic supplements varies from company to company. The "friendly" or odourless garlic supplements appear to be effective as a therapeutic agent. There is also a "sociable" garlic clove that is becoming increasingly available in supermarkets that has the same taste but no lingering odours. How these cloves differ from regular ones is unknown to me at this point.

Patients have swallowed small whole cloves of garlic to prevent mouth odour. It may be hard for the body to digest the fibrous clove, and an enzyme supplement may be required. Some have used a garlic suppository but the efficacy of this is unknown at this time. Most likely a combination of garlic cloves and garlic supplements would be ideal for those people able to tolerate garlic.

One area of concern would be people with herpes or cold sores. The arginine content of garlic is high in relation to the lysine content. The herpes virus requires arginine to multiply. Lysine is used to counteract this. Large doses of lysine are used to treat herpetic cold sores and this works by blocking arginine uptake by the virus. Foods high in arginine should be avoided by people susceptible to herpes outbreaks, and this would include garlic.

(Note: This article is to be considered informational only and is not to be construed as a recommendation of a course of action.)

Dr Brian A. Smith, from *Being Alive*, May 1991.

STUDY OF COPING WITH HIV INFECTION IN GAY MALES

A team of researchers is looking for seropositive, symptomatic gay men to participate in a psychological research project. The UBC Department of Psychology is conducting a study of coping with HIV infection among gay men. The purpose of the study is to examine the impact of HIV-related illness, the methods people use to cope with it, and the kinds and amount of support received from friends and family of infected persons.

The study involves a two hour interview with a member of our research team and filling out a short questionnaire following the interview. With participants' permission we will also send out short questionnaires to selected friends and family members following the interview, to learn more about them. Your participation in the study will be completely confidential. You will not be required to give your name if you do not wish to, however, if you do give us your name, no records will be kept which can identify your responses.

Results of the study will be published in statistical form (as average or common responses), so no individual participant can be identified by the specifics of his experience. We need a large number of participants to conduct the study, so your help is important to us! If you would like to participate, or would simply like more information, please contact Dr Rebecca Collins or a member of the research team at 822-8657. We look forward to hearing from you.



NEW SUPPORT GROUP: NATIVES AND FRIENDS

All welcome. Tom and Leonard, a pair of hard working Natives, have successfully initiated a "Body Positive" group for Natives and friends. The "Healing Our Spirit Aboriginal AIDS Prevention Society" had its 1st meeting on Monday, June 17th.

The group, on a drop-in basis, will meet every Monday evening from 5 PM to 7 PM at the PWA Lounge at 1447 Hornby Street (Between Pacific and Beach). Do not forget, everybody is welcome.

It is a Positive Support Group for People Living with AIDS/HIV and it is informal and confidential.

For more information call Tom at 876-0944 c/o I.H.A. See you all then.

SURREY HIV+ SUPPORT MEETING

A meeting for anyone HIV+ is held at Surrey Memorial Hospital, 13750 - 96th Avenue, on Sundays, at 7:30 pm in Room 2 in the cafeteria area. Call James Lamoureux, who will be available for information concerning this group at the PWA Society Monday to Wednesday from 1:30 to 5:00 pm.

CONFIDENTIAL LEGAL ADVICE

The Greater Vancouver Law Students Legal Advice Society will be operating the Law Students' Legal Advice Program, beginning the 3rd week in September. The scope of this program will cover small claims court matters, residential tenancy, the drawing of wills, power of attorney appointments, criminal law, social assistance and family law. Watch for more information to follow in future newsletters.

LIBRARY NEWS

URGENT!

The library is in desperate need of a Library Assistant to look after the library on Thursday evenings for 7 pm to 10 pm. If you enjoy reading, meeting people, and quiet surroundings, the Library needs you! Please contact Jackie, Ted or Michael

Sorry but there are no reviews this newsletter as the Library has been extremely busy proofing the computer records, checking and updating the Subject, Title and Author files. This has been facilitated by our summer student, Michael. He is doing a magnificent job at helping us to bring things together so that we will be able to serve everyone more efficiently. If our weather continues as it is and sunning is out of the question, then check out our Library.

Library Committee

MISSING BOOKS

The Compendium of Pharmaceuticals and Specialities (CPS) for 1990 has gone missing from the library. It is a reference book - not to be removed from the library. It is essential that the resource library gets this book back, as up-to-date drug information is necessary for PWA's and HIV+'s.

A copy of Michael Callen's book *Surviving AIDS* is missing from the library. Whoever has either of these books, please return them. Thank you.

Michael Habetler, Library Assistant

DIAL 911

You may need emergency help. What happens if you are unable to speak?

Vancouver 911 service advises that the name and address of the phone from which the call is made is automatically flashed on the 911 computer screen. They know where you are.

Do your best to croak out something like "help". That helps emergency recognize that you are not a child playing with the phone.

Stryker

HELPLINE MONTHLY MEDICAL FORUM: HELP!

We have lost our Monthly Medical Forum Coordinator and as this has been a valuable program to our membership, we are in great need of a Monthly Medical Forum volunteer Coordinator.

This member of our team should have interest in alternative therapies as well as all that Western Dr. stuff.

This position would require a regular commitment of five hours a month. For more info call Rick (The Pres) Waines at PWA, 683-3381.

COMPLIMENTARY TICKETS

Project Leader needed to plan and facilitate obtaining complimentary tickets to cultural and entertainment events. There are a lot of great shows out there we could be enjoying from movies to Mozart. Join this team and get out of the house and have some fun! Please contact Jackie

PEER COUNSELLING

PWA recently organized a Peer Counselling workshop in conjunction with Scott Robertson, M.S.W. Participants reported favourably on the sharing of experiences, learned and developed basic counselling skills and the opportunity to create an ongoing support network for themselves.

As a result, Peer Counselling is now available in a multitude of languages and ASL (American Sign Language). I am also happy to report we now have a female peer counsellor available. To make an appointment for your specific needs, please contact me at 683-3381.

Micheal Doyle, Peer Counselling Project Leader

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Many thanks to our production and assembly team for recent issues: Erwin, Lloyd, Brian, Wally, James, Robert, Jeff, Harry and John. If you want a volunteer assignment that's fun and rewarding, come join us on the lively Newsletter team!

NOTICEBOARD

Rainbow Garden Club: Could use some advice on starting up a garden or need to have your garden, balcony plants or house plants maintained because you're not feeling quite up to the work right now, call Murray at 469-2531.

Repairs and art work: Car repairs and electrical - stereo equipment, VCR's, etc. Call Robert at 253-4323. Silkscreening - T-shirts, posters, banners. Call Phillip at 253-4323. Reduced rate for PWA members.

Repairs of TVs, VCRs and stereos free of charge, other than parts. Call Dave at 254-0702.

Patio furniture needed by a PWA - folding chairs, chaise lounge. Call 683-0053.

Seamstress needed: by member to hem 2 pairs of slacks. Call Jon at 689-0733.

Haircuts: PWA member willing to go to members' homes or hospital bed and cut hair. Contact Rejean at 683-8142.

Vacuum cleaners in good condition needed for PWA's with dust allergies and other related health challenges. See Jackie or Harry.

Broad leaf plantain: Have you used this plant for treatment of KS lesions? If so, please contact Stryker at 683-3381.

Bridge: Day, evening bridge on the go. Lessons for new players. Contact Stryker at 683-3381.

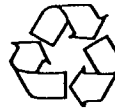
Member seeks assistance with repairs to 10-speed bike. Will pay for costs. Contact Jon at 689-0733.

Donation of a small colour TV and VCR in good working order urgently needed for our library.

Weights, bars, bench and rowing machine needed by member. Contact Harry at 683-3381.

Victoria PWA Potluck Dinner: Sunday, July 21 at 4 pm, 990 Snowdrop Ave, Victoria. Call Cobra 727-9985.

Mountain bike available on a short term check-out to members. Donation of bike helmet urgently needed to proceed with bike project over the summer. Call Jackie at the office.



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THIS NEWSLETTER MAY REPORT ON EXPERIMENTAL AND ALTERNATIVE THERAPIES BUT THE COALITION/SOCIETY DOES NOT RECOMMEND PARTICULAR THERAPY. PLEASE CONTACT YOUR PHYSICIAN BEFORE TRYING ANY NEW TREATMENT.

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