



The Update

VANCOUVER ISLAND AIDS SOCIETY

MARCH 1990

VOLUME 3, NUMBER 3

A Moving Experience

Though AIDS Vancouver Island is well educated in the demands of office placement and internal reshuffling of desks and equipment, we are exploring the possibility of a permanent home in Maynard Court (in the 700 block of Johnson St.). Stay tuned to "The Update" for the update!

Creative Shuffling

AIDS Vancouver Island has moved to a temporary space in Suite 106 at our same street address - 1175 Cook Street. Helpline, Support, Education, Street Outreach and our library programs are located in these offices. Call us if you get lost! 384-2366

H.P.D. Funding Frozen

In spite of the Hon. Perrin Beatty's visit to AIDS Vancouver Island and his apparent commitment to recognition of the work we do, Health Promotions Directorate have frozen funds at last year's level. This is a critical blow for AIDS Vancouver Island. The message we are forced to realize is not a positive one, both in terms of the government's support of grass roots organizations and in the reality we face in providing direct support and education services to a rapidly growing clientele.

Thanks from the Minister

The following is a letter from the Hon. Perrin Beatty, Minister of National Health and Welfare - Ottawa:

Dear Mr. Frost, (President, AIDS Vancouver Island)

Thank you so much for kindly writing to me about my recent visit to AIDS Vancouver Island and my Department's commitment to win in the fight against AIDS.

I did learn a great deal from the visit and I am grateful for your hosting me.

Please accept my personal thanks and keep up the good work.

Sincerely,

Perrin Beatty

Casino Night!

AIDS Vancouver Island is having another fundraising event Thursday, April 19 and Friday, April 20, 1990 at the Red Lion Inn.

See you there!

WHO to help Romania

The World Health Organization announced an emergency plan February 9, 1990, to deal with a major AIDS epidemic that has stricken more than 500 Romanian children. The crisis was caused by transfusions of unscreened blood through needles reused without sterilization. The organization will send Romania 100,000 blood-testing kits immediately and ask European governments to supply other equipment and medicines. "The cases we know of could be just the tip of the iceberg," WHO official Jo Asvall said.

Good Foods Shopping

This month, the Capital Regional District Health Program is offering free **Smart Shopper Supermarket Tours at Thrifty's** in Saanich, Fairfield, James Bay and Sidney. The tours are free of charge and will be conducted by registered Dietitians and Nutritionists. Registration for those that would like to get smart, on smart shopping and eating, may call the C.R.D. Preventive Health Program

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READ THE FINE PRINT

The Volunteer Update is published monthly by the Vancouver Island AIDS Society. Daryl Jensen, Editor; Nairn Hollott, Assistant. Submissions are very welcome and should be typewritten or typed. If possible, please include a return address. All items are the property of the Society and should be returned to the mailing box in

Reference Material
NOT FOR LOAN
AVI Resource Centre

at 479-7161 (Local 213). The scheduled dates are as follows:

Monday, March 5, 1990 (9:00 - 10:30AM)

Tuesday, March 6, 1990 (7:00 - 8:30 PM)

Wednesday, March 7, 1990 (9:00 - 10:30AM)

Thursday, March 8, 1990 (7:00 - 8:30 PM)

My Life Stalking AIDS

The following is the second part of a two part feature that raps up this month in the Update. Both parts are excerpts from Discover magazine - October 1989 and written by the man who discovered the cause of AIDS (Robert C. Gallo). He reflects on what we know about this insidious disease.

RETROVIRUSES and HIV:

What is a Retrovirus?

These viruses have turned out to be the story of the decade for us. They have just about the most efficient machinery yet found for precisely integrating their genes into ours and causing chronic infection. A retrovirus carries its genetic information in the form of molecules of RNA. When it enters a cell, it copies its RNA into DNA, which it sticks right into the cell's own DNA. This is the first part of the virus's life cycle. In the second part it uses the cell's mechanisms to manufacture the proteins needed for its viral offspring.

Human retroviruses differ from animal retroviruses in one important respect. Once a human retrovirus has integrated its genes in to the genes of a T cell, it goes into hiding. It remains quietly in the T cell until the cell is kicked into action, usually by another infection. Then the virus comes out of hiding, reproduces, and spreads. The second part of the virus's life cycle is regulated by extra genes that animal retroviruses don't have.

Retroviral Research

By the end of the 70's it was finally shown in our laboratory at the National Cancer Institute that retroviruses did indeed exist in humans. What's more, the first two kinds identified were found to infect the immune system's T cells and to cause leukemia, dispelling that other widely held belief that viruses could cause cancer in man. Both of these new human retroviruses were spread through sexual intercourse and contact with blood, and could be passed on congenitally (existing prior to or existing at birth) and

from a mother's milk to her child.

So in late 1981, when I began to hear about a new disease that came to be called acquired immune deficiency syndrome, which was spread through the same means and which also targeted T cells, things began to click. I suspected that the cause might be yet another human retrovirus, in fact the immunodeficiency virus did turn out to be a retrovirus. Now we know that retroviruses fall into two groups, those that cause leukemia and those that cause immune depression. The two are genetically distinct, yet they share some remarkable properties. Both attack white blood cells. Both cause neurological damage: the AIDS virus can cause dementia and the leukemia viruses cause diseases that are similar to multiple sclerosis. Both types of viruses are transmitted in the same way. And both are spreading in this country among intravenous-drug addicts and sexually promiscuous people.

I think the evidence is strong that human retroviruses originated in Africa. The closest relatives of the human viruses that cause leukemia and AIDS are viruses that infect African monkeys. No New World monkey is infected with either kind. Asian monkeys are infected only with a variant of one of the leukemia viruses, which might have been brought there by sixteenth-century Portuguese traders travelling from Africa. Furthermore, most of the African monkeys are not getting sick, as humans do, which suggests that they've had these viruses for awhile. In the interest of survival, viruses tend to adapt over time and become less harmful to their chosen host.

As human retroviruses continue to spread throughout the world these patterns are going to be obscured. Two hundred years from now the viruses will be distributed everywhere, and their origins will be very hard to trace. We're still in the relatively early phase of watching these viruses emerge and move about.

How long have they been with us?

With the leukemia viruses, maybe hundreds of years, perhaps a millennium (one thousand years) or two or three, but surely not hundreds of thousands of years.

As for the AIDS virus, its emergence is far more recent. The first person to be identified as infected was a Norwegian sailor in the 1950s who had sexual contacts in central and eastern Africa. My guess is that there was on-and-off infection for some decades in these areas. But then in the second half of this century, it got out of control because of societal changes (i.e. the jet age - worldwide travel).

HIV

It's been said that HIV is the most intensely studied virus in the history of medicine. Never has so much been learned about a disease in so short a time as was learned about AIDS between 1982 and 1984. The disease was defined epidemiologically, clinically and pathologically. The cause of AIDS was found. By 1984 a virus was definitely identified. A test that came out of our work was developed that same year to screen the blood supply. The genes of HIV were cloned and sequenced. And the first inhibitor of the virus, the drug AZT was tested.

Much of the work was possible only because of the recent advances in immunology and molecular biology.

Since those early discoveries, advances have come to a slower, though steady, pace. Within the past year we've made progress on Kaposi's sarcoma, a common tumor in homosexual men with AIDS. We think that the purplish lesions of Kaposi's could be reversible, at least in the initial stages, and that early Kaposi's is not yet a full-blown malignancy in which the cells are reproducing autonomously (independently). Rather the cells are still responding to external signals, to a series of growth factors initially released by T cells infected with HIV. If the tumor is dependent on growth factors, it could potentially be interrupted by a drug.

Only a few months ago it was shown that if a person infected with HIV is also infected with human leukemia virus, the development of AIDS is strikingly enhanced. The two viruses can infect a single T cell. To my knowledge this is the first clear evidence of a cofactor in AIDS: the disease will certainly develop with HIV alone, but the additional presence of HTLV-1 speeds up the

AIDS Watch

This column is for the sole purpose of extended reading material only. AVI does not endorse its content. The material is based on current research and findings taken from various publications on a month to month basis.

AZT Debate

AZT made headlines last summer when the National Institute of Allergy and Infectious Diseases (NIAID) decided the drug was too good to withhold from the public. NIAID stopped its experiment number 019 so members of its control group could receive AZT, and recommended that AZT be given to asymptomatic HIV-positive patients.

At the same time, a joint French-English study, Concorde I, was being conducted along similar lines to 019. Concorde I researchers were naturally eager to see NIAID's 019 data so they could determine if they, too, should stop their own experiment.

After a briefing on 019 results by U.S. health officials, the Europeans have decided to continue their study. French physician Jean-Pierre Aboulker said, "The results we have seen do not allow us to give a strict recommendation to give AZT." Ian Weller, Aboulker's English Colleague on Concorde I, worries that there were no 019 data on long-term AZT effects. (Average duration of treatment was a year.)

Weller also questioned why AZT did not seem to benefit patients with low CD4 immune cell counts. AZT had been expected to benefit these patients most. If it had done so, according to Weller, "that would have fitted so well with the natural history data, you would have seen clinical practice change overnight."

Concorde I physicians will be allowed to prescribe AZT to all patients, but will not be recommended to do so. Researchers will be requested to monitor all patients for long term effects.

(SCIENCE, Volume 246, Page 882)

Shifty Virus

A major problem confronting scientists who are working to develop an AIDS vaccine is that the virus itself keeps changing. HIV responds differently to antibodies at different times. During the course of an infection, a viral strain that infects only T cells can change so it infects only macrophages and monocytes. How this works is of great concern to researchers.

UCSF's Jacques Homsy, MD, has studied the disturbing phenomenon of antibody-dependent enhancement. In some AIDS patients, the antibody reaction actually increases the virus' activity. Homsy's research team studied 15 AIDS patients at various disease stages and found that, as symptoms worsened, their bodies produced more and more virus-enhanced antibodies. Some patients' antibodies neutralized some strains and enhanced others.

Homsy's findings have complicated the task of would-be vaccine developers. They must now neutralize at least some of the factors that cause antibody-dependent enhancement in order to guarantee that a vaccine is safe. Homsy has already identified one factor, a molecule on white blood cells.

(Science News, vol. 135, page 357)

The Picky HIV

Scientists have discovered what seems to make HIV discriminate between certain kinds of cytotoxic T cells (CTCs) in the immune system. The National Cancer Institute's Hidemi Takahashi and colleagues identified one amino acid position on one peptide of the virus' envelope that determined whether it attacked one group of CTCs or another. By altering the amino acid in this position from valine to tyrosine, research changed the virus' immune specificity. They speculate that this minor change may help explain how the AIDS virus can evade its host's immune defenses for such a long period of time.

(*Science*, vol, 246, page 118)

Men's Fitness Magazine/February 1990

Attitudinal Healing

The following is taken from the Canadian Attitudinal Healing Association introduction circular. For more information on getting in touch with this organization, contact A.V.I.

What is attitudinal healing?

The concept of attitudinal is based on the belief that it is possible to choose PEACE rather than conflict and LOVE rather than fear. We believe that LOVE is the most important healing force in the world.

Attitudinal healing is the process of letting go of painful, fearful attitudes. When we let go of fear, only LOVE remains. Our definition of health is INNER PEACE and healing is the process of letting go of fear.

The Principles of Attitudinal Healing

1. The essence of our being is love.
2. Health is inner peace. Healing is letting go of fear.
3. Giving and receiving are the same.
4. We can let go of the past and of the future.
5. Now is the only time there is and each instant is for giving.
6. We can learn to love ourselves and others by forgiving rather than judging.
7. We can become love finders rather than fault finders.
8. We can choose and direct ourselves to be peaceful inside regardless of what is happening outside.
9. We are students and teachers to each other.
10. Since love is eternal, death need not be viewed as fearful.
11. We can always perceive others as either extending love or giving a call for help.

Guidelines for Living Attitudinal Healing

Am I upset for the reason I think?
I can choose to change all thoughts that hurt.
I can choose to see things in a positive spirit.
I am responsible for what I see.
All minds are joined and are one.
Forgiveness opens the doorway to healing.
I can focus on the whole of life rather than the fragments.

My purpose is not to change other people.
I can change my perception of the world, others and myself.

If our of mind is one filled with doubt, fear and conflict, we will project this state outward, and it will be our experience.

If our state of mind is one of well-being, love and peace, that is what we will project and that will be our experience.

Poetry Corner

Hugs

*There is no such thing as a bad hug:
there are only good hugs and great hugs.*

*Hug someone at least once a day
and twice on a rainy day.*

*Hug with a smile; closed eyes are optional.
A snuggle is a longish hug.
Bedtime hugs help chase away bad dreams.
Never hug tomorrow someone you could hug today.
-Courtesy of Wizard of Ahhs*

M.S. Society Thanks

The following is a letter from the Vancouver Island Multiple Sclerosis Society, February 14, 1990:

Sincere thanks to all the agency volunteers who gave their time to call and thank all those who donated to the Greater Victoria United Way Residential Campaign.

Winning volunteers are as follows:

First Prize: A Cobra Cordless Telephone donated by B.C. Tel goes to Connie McConnell of the Arthritis Society.

Second Prize: A Grand City Tour for two donated by Grayline Victoria goes to Malcolm Anderson of the Boys' and Girls' Club.

Third Prize: A Tea and Coffee gift box donated by Murchie's goes to Stan Hayward of the YM/YWCA.

Thanks also to the companies who were kind enough to donate prizes!

Volunteer News

The next Helpline meeting will be held Wednesday, March 14, 1990. All those volunteers who are involved with the Helpline are urged to attend.

Thanks

Volunteer Support

Claudia Mimick, a professional counsellor who has recently moved to Victoria, has offered to provide support to the clients and staff of AVI. She will be available to talk to people on a drop in basis at the AVI office on Mondays and Thursdays from 1:00 to 4:00PM. As well as individual counselling, Claudia is facilitating the HIV+/PWA support group every other week (beginning March 12, 1990). Anyone who is HIV+, or is a PWA and is interested in coming to the group, is invited to phone AVI for more information.

Workshop News!

Caring Together

A national conference for the AIDS caregiver, **Caring Together**, will be held in Calgary, March 16 - 18, 1990 at The Delta Bow Valley Hotel.

For more information, please get in touch with David

AIDS Vancouver Island speaks to the island

Our education programs cover a wide range of groups in its ongoing speaking engagements. Here is the March schedule:

- March 2 - Drug and Alcohol Rehabilitation (Victoria)
- March 5 - Camosun College Health Fair (Victoria)
- March 7 - Victoria and Claremont High Schools
- March 8 - Victoria High School
- March 9 - Drug and Alcohol Rehabilitation (Victoria)/Lambrick Park School Health Fair (Victoria)
- March 12- Camosun College Health Care Class
- March 13- Parksville High School
- March 15- Camosun College Continuing Care Class/Stelly's School (Victoria)
- March 16- Drug and Alcohol Rehabilitation (Victoria)

March 21- Alcohol Rehabilitation Centre (Victoria)
March 22- Peninsula Community Association
Women's Counsellors

March 23- Drug and Alcohol Rehabilitation (Victoria)

March 28- Ladysmith Secondary School

March 29- Valley Native Friendship Centre Life Skills Centre (Duncan)/Parkland School

March 30- Drug and Alcohol Rehabilitation

Library News

Concern for library acquisitions is on the rise. And challenging, obscure requests are keeping the library co-ordinator's requests and recommended reading list growing in leaps and bounds. Keep those requests and comments for and on books and audio/video tape coming in. We want your feedback and opinion on material you've read in the library as well.

We now have the following complimentary books from Addison Wesley Publishers Ltd.

"Managing AIDS in the Workplace" - by Emony and Puckett

(A guide which is just what it says it is)

"AIDS: Trading Fear for Facts" - by Hein and Digeronimo

(A guide for teens)

"Thinking AIDS" - by Bateson and Goldsby

(About the social response to the biological threat)

There are also a couple of new video and audio cassettes on the shelf.

Come in, have a coffee and watch and/or listen to your area of interest in the quiet comfort of our library. If though you prefer to borrow them, please make that time out a reasonable length so others may also enjoy the material.

A suggestion has been raised that the library consider having "Theme Nights", where interested groups spend one or two hours and discuss, review and update areas of common focus within reach of the resources available in the library itself. This would be ideal for students, organizations or families.

If you have any concerns, requests or would like to reserve time in the library for group meetings, please don't hesitate to contact Helen (Library Co-ordinator), leave a message for her with anyone in the office or just simply come in during office hours, Monday through Friday 9:00am - 5:00pm.



March 1990

S	M	T	W	T	F	S
				1	2	3
4	5 HIV & PWA Support Group 7:30pm (unfacilitated)	6	7 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett	8 Business meeting 11:30am Women's support group 7:30 pm	9	10
11	12 HIV & PWA Support Group 7:30pm (facilitated)	13	14 Helpline Meeting 6:30pm Family, Friends & Lovers Support Group 7:30 pm 923 Burdett	15 Business meeting 11:30am Women's support group 7:30 pm	16	17
18	19 Support Volunteer meeting 6:30pm HIV & PWA Support Group 7:30pm (unfacilitated)	20	21 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett	22 Business meeting 11:30am Women's support group 7:30 pm	23	24
25	26 HIV & PWA Support Group 7:30pm (facilitated)	27	28 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett	29 Business meeting 11:30am Women's support group 7:30 pm	30	31