

AIDS '100% fatal'

by Jerome Ryckbort

Once a person has been infected with HIV — the AIDS virus — there is nothing we can do to stop its course. "These were the grim words of Dr. Hillary Wass, who lectured a small crowd in SUB Theatre Monday night.

"It's like watching a very rapid progression of Alzheimer's disease in a very young person," said Wass, describing the characteristics of the disease.

The soft-spoken Wass, an AIDS expert from Vancouver, presented some hard medical facts about HIV (Human Immunodeficiency Virus). Five years ago the medical community thought that patients exposed to the HIV virus would not necessarily get AIDS. Initial estimates were as low as five percent. Today, 75 percent of those who tested positive eight years ago have developed AIDS, or died. It is not known how many of the remaining patients will develop AIDS.

"You'll hear a lot of numbers thrown around. You can crunch the numbers any way you want; we simply don't know."

Wass said she thinks HIV virus will always become active. "I believe 100% may come down with

the disease." Once a person is infected, "there is nothing we can do to stop its course.

"There is no viral disease in the world that we can cure, from AIDS to the common cold."

Wass explained that anyone can contract HIV virus. "It has nothing to do with what you are. It's what you do and how often," she said. "That's why we no longer speak of high-risk groups, we speak of risk behavior.

"AIDS was always in the heterosexual population: in Africa, in Haiti, in intravenous drug users. However, since gays have been particularly vocal," said Wass, "gays got the political backlash, all the negative attention."

"Babies, wives, hemophiliacs are portrayed as innocent victims by the media, implying that others with AIDS were not innocent. Five years ago, that was not true. We were all innocent.

"Today, those who do not practice safe sex are not so innocent."

Wass also touched on some of the problems in dealing with AIDS and AIDS prevention. "You can't talk about AIDS without talking about sex.

"It is the responsibility of governments to protect the health of its citizens, but governments don't have the language to deal with the problem," Wass points out that the language is either clinical, or "dirty." Suddenly governments are forced to talk about sex.

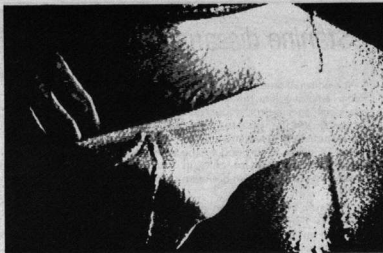
Public education is a very political issue. In many U.S. states, sodomy — one way in which HIV may be spread — is illegal. "It took a long time for governments to advertise how to have illicit sex safely, or how to use illegal drugs safely," said Wass, referring to anal sex and intravenous drug use.

Responsibility was a key issue throughout the lecture. "We are all responsible for safe sex," she said. "It is possible to minimize the transmission of the disease."

Wass pointed to abstinence (scared celibate), and condoms as alternatives. "Intact latex [of condoms] will stop the virus." Wass also reminded the audience that condoms have a 10 percent failure rate in preventing pregnancy.

In addition, "Condoms, good ones — and why use cheap ones? — are expensive. High school students can't afford them. People on welfare can't afford them. It isn't likely that condoms will be provided."

Wass also touched on some related ethical questions, including AIDS testing ("if you test negative, will you take that as a license to go



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out and practice unsafe sex?"), the tracing of an AIDS patients' sexual partners, pregnant AIDS patients ("the baby will die of AIDS"), and insurance. "If you test positive in the States, you immediately lose your health insurance," she said. The public needs information, she says. "Mandatory testing is not the way [to deal with AIDS], primary prevention is."

Wass said prostitutes in San Francisco can now attend workshops "on how to place a condom on a man without him knowing it."

"Prostitutes invent-it sale sex. They know the risks. But most multinationals refuse to wear condoms."

Wass thinks that education is working. "We've always thought that fear wasn't a very good motivator of behavior, [but] I think we have some indication that people are practicing safe sex. Gonorrhoea rates are the lowest they have ever been."

Gonorrhoea is a sexually transmitted disease which is easier to diagnose than AIDS; both may be sexually transmitted.

In closing, Wass told the crowd "the only way we can stem the epidemic of people like you inform yourselves, educate yourselves."

Although AIDS is not curable, "It is an entirely preventable disease."

Periodicals face cuts

by Brent Fennell

The University of Alberta Library is continuing its year-round struggle to maintain the quality and quantity of its collections despite rising inflation and adverse exchange rates.

Dr. Merrill Distad, the University Library's Collection Coordinator, reports the Library must cope with some apparent discriminatory pricing against North American subscribers, adding that these pricing policies have "already resulted in a loss of 1200 journal subscriptions (some of them duplicates), out of a total of 20,000, not to mention the

many new titles we might have ordered in richer times."

On top of this, the U of A Library failed to purchase many new books due to budget restrictions in 1986-87. This year, however, the Library has added several hundred thousand dollars to the funds available to purchase new books in its efforts to keep up with the exploding number of new publications.

Inflation resulted in price increases last year for periodicals that ranged from 8.3 percent in education, 11.8 percent in humanities

/social sciences, and 13.25 percent in law and the sciences, to 17.7 percent in medicine. These increases were compounded by adverse foreign exchange rates, because more than 90 percent of what the Library buys comes from outside Canada and must be paid in foreign currency.

Distad lays additional blame on some foreign publishers who, due to their monopoly and profit seeking, have contributed to "massive inflation in price compounded by exchange rates."

The discriminatory pricing exercised by their ability to monopolize the forums available to both authors and subscribers. Scholars who might wish to fight the lack of competition among specialized and prestigious, albeit overpriced journals, may feel compelled to submit articles to comply with the present university reward system. The "publish or perish" system thus helps give selected publishers exclusive information to sell to a largely captive audience of universities and research institutions.

According to Distad, research libraries fight these publishing trends by subscribing to on-line databases (which charge according to use rather than at a flat subscription rate), by subscribing to microform reprints, by sharing resources with other universities, as well as the National Library of Canada and the Canadian Institute for Scientific and Technical Information (CISTI), by continuing to automate the Library's facilities, by eliminating duplicate subscriptions, and, unfortunately, by cancelling some unique titles.

The U of A and the federal government sympathize with the library budgeting problem. The latter omitted educational institutions from its short-lived import tariff on books, and the former gave the University Library one of this year's few budget increases. Unfortunately, all research libraries are confronted with the same set of problems, which reach beyond any one institution and into the international marketplace for scholarly communication.

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