

Aids 'Tests'

Testing For 'HIV'

Over the years of the HIV/AIDS theory, different types of test have been used to try to detect such a virus in patients. These have included (1) antibody tests, which look for a reaction in a person's blood between their natural antibodies and synthetic proteins said to belong to HIV, and (2) Polymerase Chain Reaction - PCR - or 'viral load' genetic tests, which purport to use part of the virus' genetic code to detect its presence.

All these tests are indirect, or surrogate. They do not claim to detect any whole virus. Rather, they use markers to infer whether a virus might be present. Unfortunately for the accuracy of these tests, these same markers can be found in a variety of non-HIV situations. No HIV test of any kind has ever been validated against the one measure that is not indirect - the gold standard: physical virus isolation. This is because isolation of HIV by the previously conventional standards of viral isolation has never been achieved, despite numerous attempts.

Of the antibody tests for HIV, there are two main types - called ELISA, and Western Blot. Neither was designed especially for HIV, but are examples of laboratory methodologies used in many investigations. Around the world many companies market their versions of the ELISA and Western Blot antibody tests for HIV.

However, the uncertain, unvalidated nature of these tests is reflected in the product literature supplied by their manufacturers. A typical example for the ELISA reads:

"At present there is no recognised standard for establishing the presence or absence of antibodies to HIV-1 and HIV-2 in human blood." - AxSYM System, Abbott Laboratories

A typical example for the Western Blot reads:

"Do not use this kit as the sole basis of diagnosis of HIV-1 infection." - Epitope, Organon Teknika

The 'Viral Load' / PCR Test

Polymerase Chain Reaction - PCR - or the 'viral load' test, purports to detect, and quantify, blood-borne HIV in patients. However, the genetic fragments it amplifies have never been proved to originate in HIV, or in any virus. The accuracy of PCR viral load is estimated by leading doctors at plus or minus 300% - i.e. a reading of 90,000 could be 30,000 or 270,000!

The PCR was not invented for HIV. Its Nobel Prizewinning inventor, Dr Kary Mullis, calls the use of PCR in AIDS medicine, *"a tragedy in the practice of Western medicine"*.

The uncertain unvalidated nature of the PCR for HIV is reflected in the product literature supplied by manufacturers. A typical example reads:

"The Amplicor HIV-1 Monitor test is not intended to be used as a screening test for HIV or as a diagnostic test to confirm the presence of HIV infection." - Roche, Amplicor