

SEARCH FOR SOLUTIONS

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TRANSCRIPT

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SOPHIE

This is horrible. My parents are condemned to poison my kids.

VO

Canadian mother Sophie Brassard has tested positive on an HIV test. She didn't want to give her children the AIDS drug AZT because she believes it is toxic. Her children have been taken away by the authorities, and Sophie's parents are now legally bound to administer the drug.

SOPHIE

I miss them so much. I'm so scared for them, that permanent damage is going to be caused to them.

JOAN SHENTON TO CAMERA

In South Africa, many are clamouring to be given AZT. But in other countries, some HIV positive pregnant mothers are so worried about the drug's toxicity that they've refused to give it to their children, resulting in legal actions against them.

MOTHER "A"

I can hardly begin to describe how horrific I find the idea of the medication AZT being given to pregnant women and new born babies. I've seen the effects of it on adult men and adult women and it's a very strong drug. It's very toxic.

VO

This HIV test positive mother's rejection of AZT and refusal to test her baby for HIV went to the High Court in the UK. The judgement went against her and the judge ordered her to test the child. She fled the country with her partner and baby, and they are now

fugitives. This mother, like Sophie, is challenging fundamental beliefs about AIDS. New doubts are rising up about the causes and treatment of AIDS.

JOAN TO CAMERA

South Africa is in the middle of an important re-evaluation about what has been described as the greatest plague the world has known - AIDS. Today there are many societies and communities around the world who profoundly challenge the idea that a virus, HIV, causes AIDS. Their voices have seldom been heard. In Pretoria, South Africa, President Thabo Mbeki is bringing together an international expert panel to allow a wider range of opinions to be heard.

PRESIDENT THABO MBEKI

Because we have been as it were bought up on a orthodox view. Certain things that one thought one knows - HIV equals AIDS equals death. One of the things that became clear, and which was actually rather disturbing, was the fact that there was a view which was being expressed by people whose scientific credentials you can't question. I am not saying that they are necessarily correct, but it seems to me that there had been a determined effort to exclude their voice - to silence it.

VO

I've been reporting on the unfolding of the AIDS debate since 1986 in a series of documentaries allowing some of the experts that have been marginalised a voice. One of the earliest dissenting voices was that of molecular biologist Peter Duesberg, member of the US National Academy of Sciences. Through a series of published papers he has stated that it is not an HIV or human immune virus that causes AIDS, and that AZT is toxic. AIDS was not infectious he said, and in Africa people were dying not of HIV, but of poverty, malnutrition, dirty water, and the old diseases like malaria and TB, that go untreated. This led our team to travel across Africa in 1993 East to West to Tanzania, Cote D'Ivoire, Cameroon and Uganda. Our purpose was to find out if people were really dying in high numbers, and of what. And in Rakai village the total breakdown of the medical services was all too apparent. We visited the local hospital in this so called epicentre of AIDS, and found a sorry scene. Not a single AIDS patient, only an empty ward, no nurses, no doctors, only one tiny baby suffering from malaria convulsions surrounded by her silent family. We then found the only member of staff, who got up from her sick bed to speak to us.

NURSE MAXENSIA

I work as a mid-wife. And I also help in the treatment of other patients

JOAN

How do you feel?

NURSE

Now I am sick.

JOAN

What do you have?

NURSE

Malaria*

VO

Lack of staff and medicines at these local hospitals and dispensaries has meant that sick people simply stay in their own homes. But Nurse Maxensia did agree to show us the medicine cabinet stocked with some drugs supplied free under the World Health Organisation Essential Drugs Programme - however under a new cost-sharing scheme, villagers are now asked to pay a fixed rate for them - which for most means going without.

Africa has been blamed for the spread of AIDS around the world. But statistics for AIDS in Africa have been inflated because most AIDS is diagnosed through symptoms alone without an HIV test. Many people are wrongly identified. Some TB cases are wrongly called AIDS. Dr Okot-Nwang is a TB specialist in Kampala, Uganda.

DR OKOT-NWANG SYNCH

A patient who has TB and is HIV positive would appear exactly the same as a patient who has TB and is HIV negative. Clinically both patients would present with prolonged fever, both patients present with loss of weight, marked loss of weight - both patients would actually present with a prolonged cough, and in both cases the cough would equally be productive. Now therefore clinically I cannot differentiate between the two.

VO

In Kagera, Tanzania, Lucy is a frightening example of wrong diagnosis. She was diagnosed HIV positive in an unconfirmed screening test. She was ostracised by her community and became very ill. NGO worker Phillipe Krynen and his wife took her into their care and she was returned to health.

PHILLIPE KRYNEN

It's very seldom you see people who have been stigmatised with AIDS who are not dying a few months later. So Lucy was one of the first persons who, because we didn't support the AIDS tag on her, recovered and was proof to the community that you can recover from such episodes.

LUCIA(subtitles)

I am strong now and I'm back to my old weight so I can do any work I'm faced with.

JOAN

What would you like to happen?

LUCIA

I hope to have children.
(Subtitles)

VO

A few months later Lucy tested negative three times running and is now happily back in her community. As more and more publicity was given to the possible heterosexual spread of AIDS and the flames of plague terror were fanned, the issue of the drug AZT, marketed as a cure for AIDS, came to the fore. AZT was licensed in 1987 to a multi-centre trial in the USA. Those trials have been described as deeply flawed by AIDS researcher John Lauritsen, who studied the US food and drug administration papers, which were acquired through the Freedom of Information procedure.

JOHN

This study was incredibly uncontrolled and sloppy. Violations of protocol were widespread, and I might add that protocols are the rules of the game for a study. So if you violate the rules of the game, you are cheating.

MICHAEL COTTERELL

In utter desperation I took AZT. It made me ill. I went through that process five times. I was never on it for more than a month but my partner Kevin persisted and he died.

VO

Six years later Michael is in good health and still actively opposing the marketing of AZT. By 1993 in London the debate about false AIDS statistics and damage from AZT had spilled out onto the streets. There were strong protests about the Penta trials across Europe involving giving AZT to pregnant African women and their babies. This child's mother felt she hadn't been given enough information.

MOTHER

They test him. They will tell me the results in one month's time but I'm worried he shouldn't be given the AZT treatment, and I need more information about it

VO

Merryland Bazarra from Uganda is a community worker with African families in London
MERRYLAND

People are suffering. The side effects are so strong from this medicine AZT, they are losing their muscles, they have headaches, they have diarrhoea and all this. Most of them are not told about the side effects so they need more information.

VO

The debate went to parliament in that same year and George Galloway, MP, tabled a series of searching questions.

GEORGE GALLOWAY MP

If people knew that this highly toxic drug was being administered to potentially hundreds of small children, as I say, most of them black, most of them without a voice, their parents without a voice in British society, then I think these tests would be stopped.

VO

There was little change in the next five years, until the matter was raised again in the House of Lords in 1999. Information that HIV testing was not reliable was becoming more public. And the problem of what was being tested for was under scrutiny. Had HIV ever been properly isolated? *Continuum* magazine, edited by Huw Christie, published an interview with HIV co-discoverer Prof. Lut Montagnier in which he stated that HIV has never been purified, an essential step in designing reliable tests for any virus.

VO

“Well of course we looked for it , we saw some particles , but they did not have the morphology of retro-viruses”.

VO

He later said,

VO

“I repeat - we did not purify”.

HUW CHRISTIE

It was startling that Prof. Montagnier decided to acknowledge in his interview with Djamel Tahi at *Continuum* that as far back as 1983, his team were not able to purify anything you that might call HIV despite what he termed a Roman effort. So who should be surprised that when the same thing was attempted by expert laboratories in Germany and the United States who published their results in the Journal of Virology, what they found was proteins and cellular debris.

VO

At the Royal Perth hospital Western Australia, Dr Valendar Turner explains that without proteins from purified virus, HIV testing could produce countless wrong results

DR TURNER

If there is such a thing as an AIDS causing retrovirus, then its unique body parts, that is its proteins, should only be found in HIV positive individuals, and individuals who have AIDS. But this is not the case - all the principle HIV proteins have been found in all manner of cells from healthy human beings who are HIV negative.

VO

Also in Perth, senior AIDS researcher Eleni Eleopolus has published numerous scientific papers on the disturbing fact that no scientist has ever collected a pure sample of what people call HIV.

ELENI

There is no way to test for HIV. This is because all the tests are based on indirect markers, none of which has been validated by proving that the markers are positive only when the virus is present.

VO

The only type of test routinely used in England and Africa is an ELISA antibody test. It reacts if a person's blood has enough antibodies that bind with a set of test kit proteins - proteins still marketed as belonging only to HIV. If it reacts, the colour density changes. These changes are a matter of degree - high or low, not yes or no.

VO

Peter Nicholls is a 25 year old gay man. He volunteered to take part in a research project co-ordinated for Channel 4. His blood was tested on three HIV test kits commonly used by laboratories. The blood samples were run through the kits twice by London university medical school under different code numbers. Each time Peter's blood tested positive. But several weeks later Peter tested negative at St Mary's hospital, West London. And again negative at the Royal Free in North London. How did he feel about these conflicting results?

PETER NICHOLLS

Confused in a way. Obviously glad that now, having received two sets of negative results, I am obviously fairly confident I am HIV negative now. But confused as to why I would have received a positive result in the first place from the experiment that we did. And how many other false positive results there are floating around that people don't know about.

VO

Professor Etienne de Harven pioneered the electron microscopy of retro viruses at the Sloane Kettering Institute in York. Today he is highly critical of the so called research into HIV.

PROF. ETIENNE DE HARVEN

There is a most urgent need to redirect research funding. Funds should go to laboratories working on other ideas totally independent from HIV and no longer restricted to laboratories working on the hypothesis which has never been proved.

AD BREAK

PART TWO

VO

A sense that new information could bring real solutions to AIDS will be driving President Thabo Mbeke's international panel. High on the agenda will be the issue of AZT and pregnant women.

JOAN

Last year you were reported as saying in parliament that you were concerned about the giving of AZT to pregnant mothers. Why were you concerned?

THABO MBEKE

Well because lots of questions had been raised around the question of the toxicity of the drug - it was very serious. We have a responsibility as a government to determine matters of public health, and therefore we can take decisions - we have to take decisions that impact directly on human beings. And it seems to me that where doubts have been raised - questions have been raised around these toxicity questions - and the efficacy of these - AZT and other drugs, that it was necessary again to go into these matters, because it wouldn't sit easily on one's conscience to discover that you had been warned that there could be danger and nevertheless you went ahead and said, despite the danger, let's dispense these drugs

JOAN

Some AIDS doctors say that the evidence is overwhelming, that HIV is the cause of AIDS and that AZT is of benefit. What is your comment on that?

THABO MBEKI

Well I say that why don't we bring *all* points of view about those matters together. Let them sit around the table, discuss all of this, produce such evidence as there may be, and let's see what the outcome of all of that discussion is, which is why this international panel that we're talking about. They may very well be correct. But I think that if they are correct and they are convinced about their correctness, it ought to be - it would be a good thing for them to demonstrate to those who are wrong that they are wrong.

JOAN

People say that you're not keen on giving AZT to pregnant women - I'm personalising this of course - because its too expensive and in some ways you're seen as penny pinching. What do you reply to that?

THABO MBEKI

Well that surely must be a consideration for anybody who decides that this drug must be given to stop these transmissions, as it's said, from mother to child transmissions. Its extremely costly - that's something that we have to take into account. But you see I'm saying that we also need in that context to answer questions, particular questions about the toxic effect of this drug. If you sit in a position where decisions that you take can have - would have - a serious impact on the health of other people. You can't ignore a lot of experience around the world which says this drug has these negative effects.

JOAN

Why have you been so outspoken recently about greed and the pharmaceutical companies?

THABO MBECKI

I think a lot of discussion needs to take place; the approach to health and treatment of people does seem indeed to be driven by profit. We - you probably would know this - we had a long wrangle with the pharmaceutical industry internationally about issues of parallel imports and so on. What we are saying is that we want to make medicines and drugs as affordable as is possible to what is basically largely in South Africa a poor

population. We needed to find these medicines where they were cheapest, properly controlled, properly tested, the genuine product, no counterfeits.

JOAN

In the press you are exalted to confine, and I quote, confine yourself to the job to which you were elected, and leave specialised subjects to the taking of the best available advice. That was today. What's your response?

THABO MBEKI

Well I don't imagine that heads of government would ever have the possibility to say, I'm not specialised in economics, therefore I can't take economic decisions. I'm not a soldier, therefore I can't take decisions affecting the department of defence, or I'm not an educationalist, a pedagogue, therefore I can't take decisions about education, I don't particularly see why health should be treated as an extremely specialised thing, about which the president of a country can't take health decisions. I think it would be a dereliction of duty to say well, as far as health policy is concerned we shall leave that matter to the doctors and the scientists. As far as education is concerned, we'll leave that matter to educationalists and pedagogues. I think that is absurd actually.

JOAN

How do you feel about the reaction of some of your country's leading virologists and intellectuals to your position?

THABO MBEKI

I get the sense that, as I was saying earlier, that we've all of us been educated into one school of thought, and really I am not surprised at all that you would find, I'm quite sure an overwhelming majority of scientists in this field, in this culture, people would hold a particular point of view because that is all they were exposed to. This other point of view which is I think part of what is frightening, this alternative point of view, in a sense has been blacked out. It must not be heard, must not be seen. I mean that's a demand now. Why is Thabo Mbeki talking to discredited scientists? Giving them legitimacy? Its a very worrying thing that anybody can say today - in today's world - that there is a point of view that is prohibited. That's banned. That they're heretics who must be burnt at the stake. And it's all said in the name if science and health - it can't be right.

JOAN

Now it has been said that the pharmaceutical industry is more powerful than governments. Are you actually going to go as far as taking this debate to other world leaders, like President Clinton, like Prime Minister Blair, or perhaps the Prime Minister of India who has expressed his support for an investigation into these issues as you are?

THABO MBEKI

Sure yes certainly, I do want to raise the matter with a number of political leaders around the world. At least to inform them about what we are doing, to get them to understand the truth about this issue, not what they might see on television or in some newspaper. And indeed we were very encouraged to see the Indian government getting itself involved in this issue. I think the concern around these problem questions which in a sense have been hidden, I think that concern will grow around the world. And the matter is critical because the reason we are doing all of this is to be able to respond correctly to what is reported to be a major catastrophe on the African Continent. We have to respond correctly, and urgently, and you can't say respond correctly by closing your eyes and ears to any point of view, any scientific evidence that is produced. A matter that is seems to be very clear, in terms of the alternative view that is being presented, is what do you expect to happen in Africa with regard to immune systems, where people are poor, subjected to repeated infection, and all of that? Surely you would expect these immune systems would collapse, and I've no doubt that that is happening. But then to attribute such immune deficiency to a virus produces a specific response, and what we are discussing here as the South African government is that it seems incorrect to respond to this AIDS challenge, within a narrow band. If we only said there's a virus - safe sex, use a condom, end of story, we won't stop the spread of AIDS in this country.

VO

South Africa's children will benefit from the work of President Mbeki's expert panel and health workers like Sister Maria Nukeri at the Alexandra Clinic look forward to the findings.

SISTER MARIA NUKERI

I believe that the step that State President has taken, pertaining to this panel that has to look into the whole arena of HIV, is most welcomed, because from that I believe we'll have a clear mandate as to the way forward.