

MODEL QUESTIONS about AIDS



for Intrepid Reporters

- Wrong: trepid media reporter accepts this from NYU doctor as an answer to the question of whether AIDS can be transmitted by saliva = "deep kissing": "We probably don't think that it is very likely to be transmitted that way."
- RIGHT: Intrepid Reporter asks follow-up questions: Why do you need so many adverbs to answer the saliva question? Are you saying: "I assure you—it can't be transmitted that way."? Are you saying: "I don't know."? Or are you saying: "I don't know, but I/we/they want to assure you that it is probably very unlikely that it is likely to probably be transmitted that way?" Are you being cautious for scientific reasons, or are you being evasive for political reasons?
- Wrong: trepid media reporter appears not to hear the doctor say "saliva" and then "saliva and tears"; continues inane discussion as to the probability of one school kid jabbing another with a contaminated needle.
- RIGHT: The Tootsie Pop Question: if one kid offers friend a lick off his Tootsie Pop, won't that transfer saliva just like "deep kissing" would?
- RIGHT: Borrowed Pen or pencil question: if your "high risk" colleague loans you a pen or pencil that has been in his mouth and you absent-mindedly put it in your mouth, won't that effect a saliva contact similar to "deep kissing"?
- RIGHT: What is the medical basis for saying "deep kissing"? Wouldn't a shallow and hasty kiss produce saliva contact?
- RIGHT: What is the basis for the argument that saliva isn't contagious because "there isn't enough virus" in saliva or there is only a "minute quantity"? Don't viruses multiply very rapidly? Since the virus seems to be quite at home in saliva, why wouldn't it increase? Who did the laboratory experiments which measured the "minute quantity" of the AIDS virus in saliva? Were there in fact any such experiments? Or was it an assumption made to explain the contradiction between saying that even though the virus is in saliva, it can't be transmitted by saliva?
- RIGHT: If the virus is in your saliva and you cough, doesn't that put virus-bearing droplets out where someone else could breathe them in?
- RIGHT: Doesn't the evident possibility of transmission of AIDS by saliva invalidate the "no transmission via casual contact" assurance?
- Wrong: trepid reporter focuses on the slight possibility of being exposed by one of the few AIDS cases who are still able to get around.
- RIGHT: Intrepid Reporter focuses on the real possibility of contagion from one of the estimated 100,000 ARC patients who aren't hospitalized or the estimated one million who have been exposed and who may be contagious to others even though they are still healthy.
- RIGHT: Intrepid Reporter focuses on the 70% of male homosexuals who test positive for the AIDS virus and who must be presumed to be infectious to others whether or not they develop AIDS themselves.
- Wrong: trepid reporter accepts without blinking the argument that AIDS isn't very contagious because health care workers are most likely to catch it and none of them have.
- RIGHT: Intrepid Reporter blinks and raises the following objections: (1) 26 of 1750 health care workers tested positive for the AIDS virus in the most recent test. That is a rate of 15 people out of 1000. At that rate of exposure, a lot of health care workers have been exposed to AIDS. Whatever the supposed explanation, a rate of 15 out of 1000 isn't the same as "none". At that rate, 7500 out of 500,000 health care workers will test positive to the AIDS virus. That's the same as "none"? (2) Health care workers are LEAST likely to be exposed to AIDS because: a. they are well aware of the danger and they were aware of it long before the public was. b. they know the source of their danger, that is, they know who the AIDS patients are. c. they routinely use masks, goggles, gloves and gowns to protect themselves and to protect the patient. d. the dying AIDS patient may be less contagious than the ARC or AIDS-exposed person that the rest of us encounter without knowing it and without any protections.

Wrong: trepid reporter accepts as "the best evidence" the argument that AIDS isn't very contagious because it hasn't appeared in the "household contacts" of AIDS patients.

RIGHT: Intrepid Reporter scrutinizes this "best evidence" and notes that: (1) it is based on the assumption that adult male homosexuals live at home with their parents or with some other non-homosexuals. Because any spread by "household contact" to other homosexuals won't be recorded as such since these housemates are already part of the "high risk" group. (2) it assumes that adult male homosexuals not only live at home but that they regularly share wet kisses and glasses with their fathers and mothers. (3) it implies that a systematic survey was made of the household contacts of AIDS cases; that an interviewer targeted the possibility of saliva exchange; that these household contacts were notified to come in for an AIDS exposure test; that the test turned out negative. Intrepid Reporter discovers that none of these things were done. He also discovers that they started using this argument in 1983 before they had an exposure test and only two years after the first bunch of AIDS cases was reported. Since AIDS takes years to develop, the non-appearance of fully-developed, hospital-bound AIDS cases (the only ones this "evidence" takes into account) among heterosexual housemates whose very existence is only a hypothesis (an improbable one) two years after it first appeared among homosexuals wasn't evidence at all—it was a rash, silly and entirely unscientific assumption. It still is. If these homosexual AIDS cases ever had heterosexual housemates who shared wet kisses with them (these are heterosexuals?) they would be long gone after the panic of 1983. Do adult American males usually share wet kisses with their mothers? their fathers? This is the proof that saliva isn't contagious? This is the "best evidence" that saliva isn't contagious? As a matter of fact, it is. That's how good the rest of their proof is. Now they use this "evidence" to resolve doubts about new cases! This is how they know that "there isn't enough virus" in saliva!

Wrong: trepid and torpid reporter dutifully reports that AIDS has been spread mostly through sex, that is, sodomy, between homosexuals. Since none of these thousands of cases was due to saliva, they constitute a major argument that AIDS isn't transmitted by saliva.

RIGHT: Intrepid Reporter discovers that the only certainty in the homosexual cases is that one man caught it from another. Since saliva—deep kissing and oral/genital sex—is commonly involved in the homosexual encounter, any of the homosexual cases of AIDS may be due to saliva. In fact, it is just as reasonable to assume that all homosexual AIDS cases are due to saliva as it is to assume that none of them are due to saliva.

RIGHT: What is the biochemical reason for assuming that none of the homosexual AIDS cases are due to saliva?

RIGHT: What was the social and political reason, at the time of the 1983 AIDS panic, for assuming that none of these cases are due to saliva?

Wrong: trepid reporter adds up the arguments and convinces herself (but not her viewers) that AIDS can't be transmitted by saliva and so can't be transmitted by casual contact. "Don't worry! Do I look worried? What, me worry? See the fearless way I am gingerly touching this AIDS-infected baby? Off camera, I even gave him a wet kiss. I almost kissed him anyway. Careful, casual contact is nothing to worry about! Doctors don't lie! Only when they have a very good reason!"

RIGHT: Intrepid Reporter adds up the arguments for the anti-saliva, anti-casual contact assurance: (1) a double false assertion: health care workers are most likely to be exposed to AIDS and none of them have been. (2) a silly assumption plus a false implication: homosexuals normally have heterosexual housemates who share glasses or wet kisses with them. A complete investigation of these household contacts was made and none of them showed exposure to AIDS. (3) an arbitrary and unprovable assumption: all cases due to homosexual contact result from transmission by body fluids other than saliva.

RIGHT: Intrepid Reporter concludes that when an assurance rests upon false assertions, supported by a silly assumption and buttressed by an arbitrary assumption, it is very likely that the whole thing may suddenly collapse, bringing down reassuring medical establishment spokesperson and trepid reporter with it.

- Wrong: trepid reporter assumes that the 50% of the public who don't believe the "no casual contact" assurance are credulous dummies, gripped by irrational panic.
- RIGHT: Intrepid Reporter pursues the question as to where people are getting their information. Discovers that it has been coming from many nurses and doctors who never believed the "no transmission by saliva" assurance. Unable or unwilling to publicly challenge the official position of the medical establishment they have privately passed the word to friends and family members.
- RIGHT: Intrepid Reporter decides that it is the trepid reporters of the media that are the credulous dummies, gripped by irrational mental conformity syndrome and superstitious awe of the medicine man. They have forgotten the first principle of Intrepid Reporting: when public officials, medical or other, have to keep reassuring the public that something is so, it is a very good clue that it isn't so.

RIGHT: Intrepid Reporter looks at the origins of the "no AIDS contagion by saliva" assurance circa 1983. Discovers that the reason for it was a public relations emergency. It was a response to the AIDS panic of 1983, not to the medical evidence available in 1983. But panic is a justifiable reaction to the epidemic outbreak of an incurable and fatal disease, especially if it can be transmitted by casual contact, that is, saliva, alias a kiss, a Tootsie Pop, a Borrowed Pen, or an energetic cough.

The danger posed by the AIDS epidemic took second place to the social and political dangers created by public reaction to the news of the "gay plague". Many gays, including those in the medical establishment, would have found themselves abruptly unemployed or worse if AIDS were as contagious as people feared it was. A doctor who is contagious for an incurable disease which is readily transmitted to others can hardly continue to practice medicine.

Into the breach rushed the medical establishment with the assurance that AIDS can't be transmitted by "casual contact". The probability that AIDS can be transmitted by saliva—all the good evidence points that way—had to be denigrated because it was obviously incompatible with the "no casual contact" assurance. So the assurance about saliva was deduced from a political necessity and they found what evidence they could to support it. That is why the "evidence" can't stand up to intelligent scrutiny by Intrepid Reporters—so far it hasn't had any.

The "not enough virus" in saliva assertion is an attempt to offer an explanation for the puzzling contradiction between saying that the virus is in saliva while also saying that the virus can't be transmitted by saliva. The contradiction was created when the hard medical fact that the AIDS virus is in saliva was put together with an assurance born of public relations necessity: AIDS can't be transmitted by "casual contact". They have been stuck with trying to explain that contradiction ever since.

The concession by some Public Health Service doctors that "deep kissing" or "wet kissing" might transmit the AIDS virus is another attempt to get themselves off the hook. They concede that the virus can be transmitted by saliva without abandoning the official position that "it requires sex" to transmit it. But this lame attempt to reconcile two irreconcilable positions only leads to a new wallow of contradictions.

Postscript to trepid and semi-Intrepid reporters: Don't bother sending acknowledgments, money, etc. just because I've handed you the scoop of the decade and rescued you from the impending calamity created by your own trepidity. All I ask is that you (1) discard your tie for the afternoon. (2) practice saying "Either" in a defiant way. (3) practice saying: "Medicine Man full of hokum!" in a loud voice until it becomes a war chant.

Then, having halfway shaken loose from careerist/conformist syndrome, study the MODEL QUESTIONS and try to assume the Intrepid Reporter psychology necessary to pursue them without servile deference to authority, medical or other. Remember! The career and/or life you save may be your own.

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