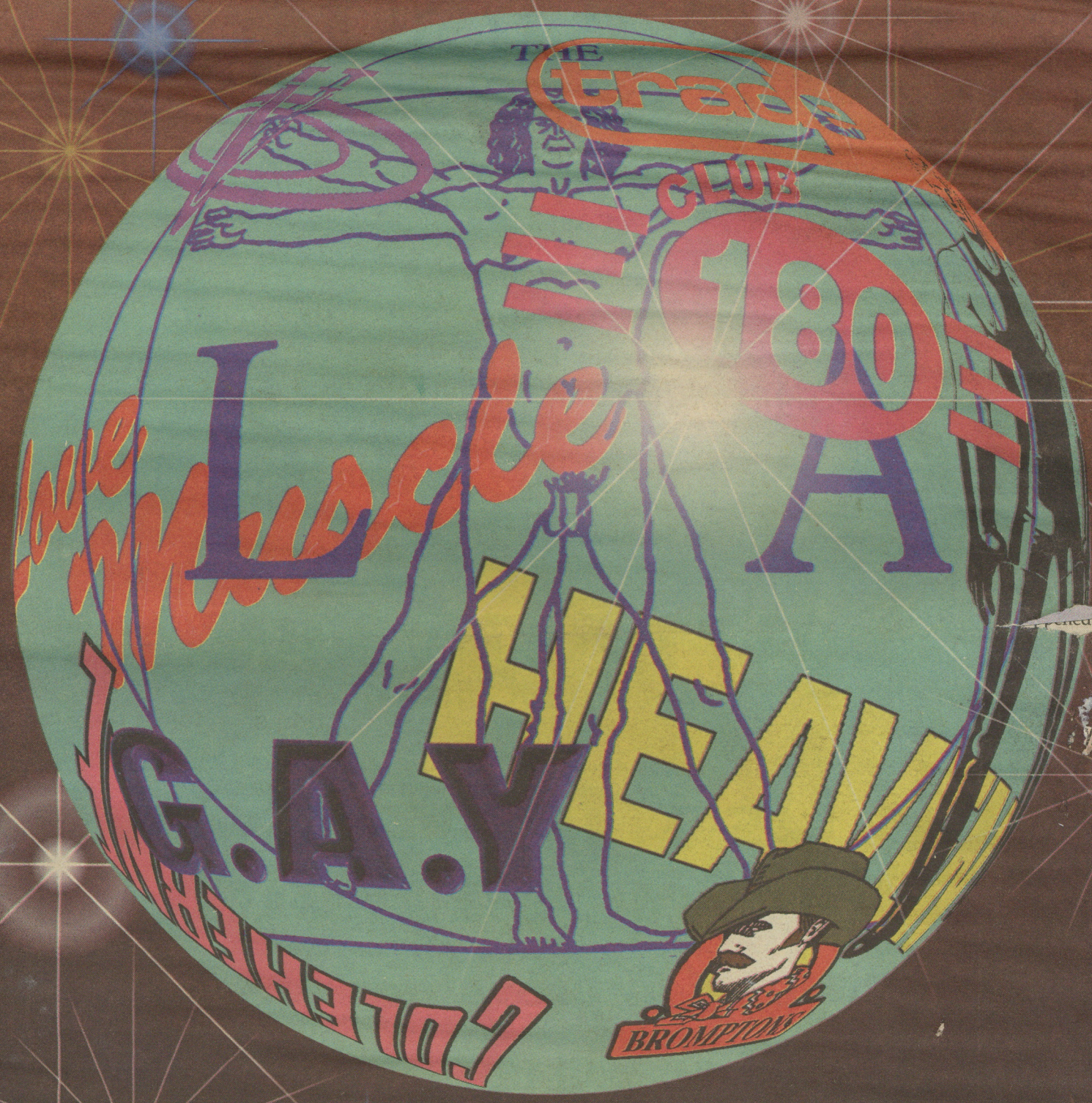
positive nation

February 1996 - Issue No. 4

the national voice for the HIV & AIDS community



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A Look Behind The Glitz & Glamour

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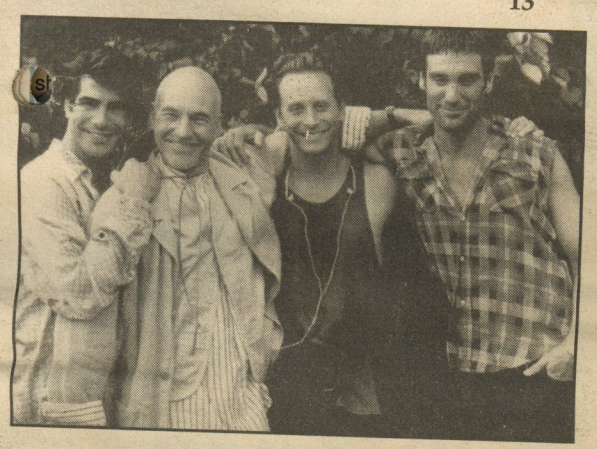
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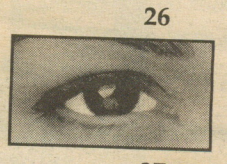
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PUZZLES'N'STUFF

If you're wondering what's happened to Puzzles'n'Stuff, Empower Publishing the people who bring you Positive Nation is pleased to announce that from March 1996 Puzzles'n'Stuff will be launched as a bi-monthly magazine for children living with and affected by HIV and AIDS, their parents, guardians and carers. More information in next month's Positive Nation.

The next issue of Positive Nation is out on 28 February 1996

London East AIDS Network
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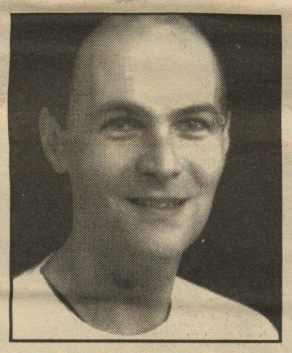
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Annie get 'your' chains off!

Dominic Gough
MANAGING EDITOR

What year is this? I thought when the clock struck midnight on December 31st, we were entering 1996, however after the reports I have been reading on the chaining of prisoners in hospital, I think we must have experienced a time slip and have landed back in 1496.

If you have been following the press reports on the chaining of prisoners in hospital, you cannot have helped but read the story of Jane.

Jane is HIV positive and is in St Mary's Hospital, London, receiving treatment while being on remand awaiting trial for drug related offences. An addict herself, she is accused of conspiracy to supply heroin. She has no previous convictions and, as yet, has still to be proven guilty of her alleged crime.

Under government regulations Jane was kept shackled to a prison officer, day and night. Prison staff wrapped the chains in a jacket or scarf to stop them from rattling while she slept. When she went out of her hospital room, the prison officer followed and even when she went to the toilet, she was still chained. (They had ensured, however, that the chain was long enough to go under the toilet door. - How considerate!)

Now, as far as I'm concerned, it doesn't matter what someone has done, if they are seriously ill, it is barbaric to chain them to their hospital bed. I've spent time in St Mary's hospital, and it's hard enough to be in hospital getting to grips with this vile disease. You need space and time to get your head around all of the information the medics will give you. You may have to undergo invasive medical procedures and be connected to drips and pumps. The last thing you need is a prison officer chained to your arm every minute of every day.

Jane is not the only case we have heard of. We are aware of three other cases of prisoners living with HIV or AIDS, who have been chained to prison wardens or their beds while in hospital receiving treatment.

One of the cases, we will call him Tim, was on a four bedded hospital ward, in a well known London Hospital, sharing with three other guys. He had PCP. He could hardly walk, due to shortness of breath and had a drip attached providing his treatment. He had two prison officers sitting by his bed 24 hours a day. He was chained to the bed to ensure he didn't slip past the watchful eyes of the wardens.

Now let's get this right. He is seriously ill, he has a life threatening condition and they are worried he is going to use this as an opportunity to slip away and avoid his punishment. Only when he sought the help of an advocate was he moved into a side room on the tenth floor of the hospital. The prison staff still insisted on chaining him to his bed, even though the only way out of the room was through a door guarded by two prison officers or a window which had a one hundred and twenty foot drop to the ground.

We are meant to live in a civilised society that cares for people. Yes, we need a prison service and yes, if people break the law they should be punished, but if someone in prison requires outside medical treatment, they should be treated with the same care and respect that everyone deserves.

The chaining of women prisoners giving birth outside of prisons has now been stopped, but we must still demand that any person suffering from a serious illness such as AIDS, should not be chained to a bed or to a warden. Yes, the prison service needs to ensure that a prisoner does not abscond while in hospital, but surely if there are two wardens present, that should be enough.

As far as the Nation is concerned, the chaining of seriously ill prisoners must stop and stop now, the cases of Tim and Jane highlight the urgent need for parliament to discuss the barbaric treatment of sick people under the care of the prison service.

To ensure the pressure is kept up, Positive Nation will be writing to all Members of Parliament demanding that this shameful practise stops now. If you agree with us, then write to your MP asking them to support the unchaining of seriously ill prioners.

Back at the Nation, things have moved on a great deal since our last issue in early December. Firstly we needed to take a break, and if you are wondering where the January issue got to, we felt as we went to press with the December issue, that we would skip one issue to allow us to catch up. When I set up Positive Nation, I knew that it would create a response from people, but the scale of the response was far greater than I had ever dreamed of. We are getting around 100 letters a week, our subscriptions now top 600 people and every day the phones ring off the hook with people wanting to know more about us, and how they can support us and get involved. So if you are still waiting for a reply, can I apologise and say that we will be with you shortly.

I would also like to welcome the new editorial team, who have joined us. Lionel Rhodes, as Asst. Editor, brings with him a wealth of media experience and has lived with the virus since 1986. Sebastian Sandys, as News Editor, has many years' experience as a journalist and has been an active AIDS campaigner. David Eason joins us as our Alternative Health Editor and brings his own unique outlook on the world, life with the virus and treatment issues to the Nation. Paul Vagg our Music and Video Correspondent has worked for many years within the music industry, producing and writing for many big name bands. And a big welcome to Andy Ransom, who tries to ensure that what you read makes sense and follows the Queen's English as much as posseable. (Oh! He missed that one.) If you look back at issue one of the Nation, I hope you think things are getting better. Let us know what YOU think.

Another big change: We are moving to bigger and more modern offices in time for the next issue. More on that next month. We need to ensure we plan for the future, so our new offices are being fitted with the latest computers and equipment to ensure that we can provide you with the highest quality publication we can produce. Why? Because you all deserve the best, and at the Nation we are committed to giving you just that.

We still have a long way to go, and still need more people to join us in developing the Nation into a national publication. You can join us, no matter where you live, even if you have never written for a magazine before. Your views count. Drop us a line and we will send you an information pack on how you can get involved.



NEWS from the nation

News Editor: Sebastian Sandys

CHAINING JANE



A London hospital is facing criticism for not standing up for its patients rights

A WOMAN WITH HIV spent a week shackled to prison officers day and night at St Mary's Hospital, London. Jane, 34 was transferred to the hospital from Holloway prison where she is on remand charged with drug offences. She has not been convicted of any offence that led to her arrest.

Despite her suffering from stress and suspected hepatitis, senior medical staff at the hospital refused to insist, for seven days, that she be unchained on medical grounds. The prison authorities have maintained that, despite a ruling last year that prisoners regarded as a security risk should be chained to officers at all times, they would remove the chains if ordered to do so by doctors on medical grounds. This position was restated in the House of Commons by the minister with responsibility for prisons Anne Widdicombe.

Lawyers acting for Jane made repeated attempts to have her released on bail so that she could receive visitors and have the chains removed. These attempts have been unsuccessful. The latest application before Mr. Justice Thomas on January 15th went ahead with no medical evidence being presented by staff from the hospital regarding the detrimental affects to Jane's health by being held in chains.

Jane's solicitor, Sara Cleary told Positive Nation that medical staff at the hospital were being "wimpish" in their dealings with the Prison Service over the case. Both lawyer and patient believe that if the hospital had insisted on the removal of the chains earlier they would have been. Eventually, seven days after her admittance to hospital, officials from St Mary's and Holloway prison allowed the chains to be removed.

Shackling of prisoners in hospital was introduced as standard procedure following a number of high profile escapes of IRA prisoners and others last year which seriously embarrassed the Home Secretary, Michael Howard. Anne Widdicombe has consistently defended the practice and has denied claims that it is inhumane and a denial of a prisoner's human rights. Campaigners have taken a different view. Stephanie Elsie of Positively Women is concerned that recent publicity surrounding the shackling of pregnant prisoners in hospital will overshadow the plight of women who are HIV positive. She believes it is essential to highlight these cases. "There are a number of positive women in Holloway," she said, "and the treatment they receive is appalling." She is calling on people to write to Richard Tilt, the Acting Director General of Prisons to protest. "We want as many people as possible to write," she said. "This practice must be stopped. " She also asked that people write to their MP.

The fact that patients who are clearly too ill to even consider a possible escape are being treated in this way has provoked outrage from MP's and health care professionals alike. George Howarth MP, Shadow Home Affairs spokesman told Positive Nation that he believed, "The unnecessary shackling of positive patients who pose no security risk is symptomatic of the government's refusal to take responsibility for the prison service." He added, "This failure to take responsibility is creating unnecessary fears within the service that lead to incidents like this one."

Positive Nation believes that at least four other HIV positive prisoners have been shackled in hospital in recent months. Legal moves are expected soon to challenge the practice under European law.

MANCHESTER GROUP UNDER ATTACK

BODY POSITIVE NORTHWEST, based in Manchester are vigorously defending themselves against charges that they have become undemocratic and are failing to take into account their clients' wishes.

Changes to the Articles and Memorandum have provoked protests from a small group of former directors and service users who are launching a legal challenge to the present Board of Directors.

The dispute centres on who is and who is not a member of the limited company that controls the group. In the past all former directors have retained their right to be members but this right, according to Gary Pawsey, the company secretary, was based not in law but in custom and practice. Mr Pawsey told Positive Nation that changes made at an AGM in August 1994 have simply clarified the situation and placed the management of the group on a firm legal footing and ensures continuity of management. Former director Robert Hall disagrees. He believes the directors have acted unlawfully and has, with others, instructed solicitors to take the current Board to court in order to win back the right to membership of the company.

Pawsey is confident that the Board will be successful in defeating the challenge and that BP Northwest has acted properly and in the best interests of their client group. This view appears to be shared by the majority of the funders of the group. David Regan from the Regional Health Authority told the Nation, "It wouldn't be right for me to comment on any dispute regarding the internal structures of groups we fund but we would be concerned if such a dispute damaged service provision." However, he added, "In the last couple of years Body Positive Northwest have come on leaps and bounds and are entering another stage of their development as a major service provider in the region. It is my view that Body Positive are currently a well respected service provider."

In a separate development George House Trust has come in for criticism from the Village Group Charity. Relations between the two groups broke down about twelve months ago and questions have been raised as to whether the Village Group will continue to fund George House. Chris Bryant, Chair of the Village Group, told Positive Nation that he was disappointed that relations had been so bad but hoped that relations could be repaired as soon as possible. The Village Charity announced in November that they would no longer be funding the GHT Welfare Fund and would instead fund the Terrence Higgins Trust and Crusaid on the assurance that these funds would be ringfenced for the Northwest.

NEWS from the nation

UK NEWS

GRAVY TRAIN COLLIDES

The shifting of this year's Pride March and Festival to July 6th has meant an unfortunate clash of dates with the XI International Conference on AIDS due to begin in Vancouver on July 7th. AIDS activists are predicting an unseemly dash to the airport following the Festival to try to get on one of three flights that will leave London in time to register for the conference in Canada the next day. Tickets are being snapped up and early booking is advised.

HONOUR FOR REG DWIGHT!

Reginald Dwight CBE is believed to be the first person in the United Kingdom to have been recognised for his work in the field of HIV and AIDS. Dwight, better known of course as Elton John, received the order of the Companion of the British Empire in the list announced by Downing Street at the end of last year. He was naturally delighted by the gong which was awarded for his services to music and charity. The Elton John Foundation is one of the largest charitable trusts specifically working with HIV in country.

CONCERT OF HOPE - NOT

The National AIDS Trust has come in for harsh criticism following the cancellation of the prestigious Concert of Hope just days before it was due to take place at Wembley on December 1st. AIDS activists were furious at the cancellation calling it a poor indictment of the efforts of the NAT to mark WAD in a way that was appropriate to the needs of the HIV community. It is believed that a lack of success in attracting high enough levels of commercial sponsorship and the failure to sell enough tickets made cancellation unavoidable. Both Wet Wet Wet who were due to perform and the Princess of Wales who had agreed to make a high profile visit to the concert were said to be disappointed.

FUNDING CUTS HIT SERVICES

Purchasers and providers of HIV treatment and care services in London have met to begin to plan for the cuts in service provision made inevitable by the recently announced 7.2% cut in funding. It is feared that the cuts will lead to the closure of some voluntary sector groups.

The Inner London HIV Health Commissioners' Group has issued guidelines to the voluntary sector outlining ways in which the changes in service provision can be best managed to minimise the effects of the cuts and to ensure as much continuity of provision as possible. The commissioners recently presented their protocol to the Pan London HIV / AIDS consortium.

Stephen Jones of the Commissioners told Positive Nation, " We are seeing cuts in HIV treatment and care funding on a national scale for the first time and we want to work closely with the voluntary sector to ensure that changes in funding arrangements are managed effectively. We are committed to voluntary sector provision and will ensure that they are treated equitably in the next financial year." Jones added however that " Many voluntary groups have other sources of funding than statutory grants and we will be encouraging them to maximise these as far as possible."

Funding for new drug therapies, including combination therapies, will be seen as a priority and this will necessarily affect the voluntary sector's grant levels.

The Market management protocol that the Commissioners have released suggests to the voluntary sector how they might establish their funding priorities for next year in advance of the new contracts being signed by March 31st. The priorities outlined include front line services, services and intervention with a proven health gain and areas of established epidemiological need. It states that "resources will be targeted to ensure the continued survival of core providers and services " and recognises that this may have to be achieved by " disinvestment in non-core services."

Positive Nation believes that both sides accept that some organisations may be forced to close as the cuts take effect . It is not clear at this stage which organisations will be forced to close their doors.

However, we have learnt that contingency plans are being drawn up to ensure that the clients of any group that does cease to exist will still be able to obtain services from other groups. Both the providers and the purchasers have assured Positive Nation that there is no need for anxiety at this stage. Service users will continue to be provided for and despite the cuts, levels of service provision will remain high.

NEW CAMPAIGN FROM HEALTH EDUCATION AUTHORITY

The Health Education Authority has launched a new campaign aimed at providing broad based sexual health and HIV information for gay and bisexual men on the scene. The campaign consists of a series of *Infoverts* aimed particularly at young gay men.

The campaign will run in the gay press this spring and features nine advertisements covering topics such as Hepatitis B, the risks of HIV infection involved in insertive and receptive anal sex and the need for regular sexual health check-ups.

Announcing the campaign on Freedom FM's Positive Zone programme, Clive Stevens of the HEA said, "Research shows that sometimes younger and inexperienced gay men are not always fully aware of risks to their health. This campaign sets out to give them some important basic facts."

GMFA and others have welcomed the campaign.

ARCHERS DENIAL

The BBC has taken the unusual step of denying speculation that a character with HIV was about to be introduced into the long running Radio 4 series The Archers.

Reports began circulating at Christmas time that Kate, a character whose home has been raided by the drug squad, was to be killed off with AIDS.

Speaking to Positive Nation a spokesman for the BBC said, "Whist we don't normally comment on our storylines we want to knock this one on the head." He continued, "AIDS is not off limits for The Archers, but we have no plans to do it for the moment. If and when we do we will cover it accurately and sensitively."

KENT SELF-HELP GROUP CLOSES

Fighting Fit a self help group for positive people in Kent has closed its doors after the East Kent Health Authority refused its application for a grant. Alan Beck the group's co-ordinator took the decision to close in early January. He said, "It is impossible to continue to provide services out of thin air."He continued, "This is another example of the Authority's failure to take seriously the concerns of people living with HIV."

A Client Needs Assessment that Beck believes will point to the importance of the group has not yet been published despite having been delivered to the Authority some weeks ago.

PROMENAID

The eighth successive Promenaid event took place at the Haymarket Theatre, Leicester on January 14th. Artists Tom Robinson and Bobby Crush were among the cast who entertained an audience of 600. The event, which included a day for facepainting, raffles and a celebrity auction, attracted 1000 visitors to the theatre and raised £13,000 for the David Manley Trust and other HIV support services in Leicestershire. Since beginning in 1986 the events have raised almost £100,000 for the groups involved.

POSIBASE

A new database recording details of people who have been diagnosed HIV positive and are not taking any special medication such as AZT has been set up. The purpose of the database is to record details of such individuals so that regular reports can be made to the press giving details of survival rates and other relevant information.

Brian Parry, who set up the scheme said, "People not taking medication seem to be ignored when studies such as the Delta Trial are conducted and information on this group should be available."

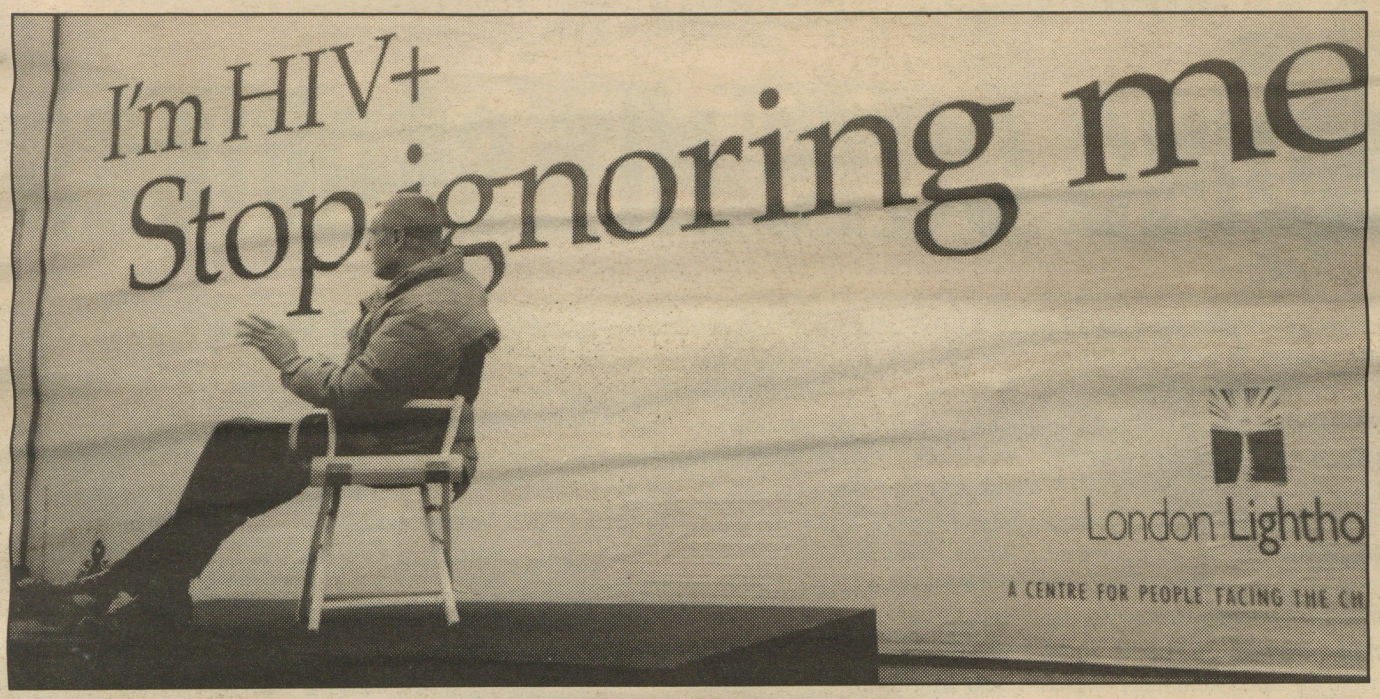
Posibase can be contacted at PO Box 130 London W5 1DQ.

RUBBERSTUFFERS

Free condoms are being given to gay men in pubs and clubs in London for the first time. Under the terms of a new deal funded by the National Health Service, the group Rubberstuffers have been placing condoms and lube in over eighty bars and clubs across the capital since January 1st.

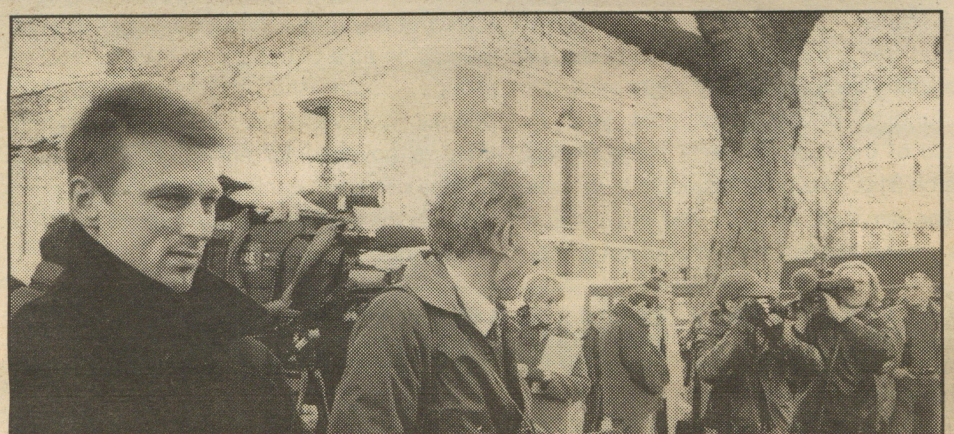
Rubberstuffers' director Chris Markham said, "We are delighted to be able to launch this initiative". He continued, " We hope that, in future, no gay man will be having unsafe sex because there were no condoms available to him."

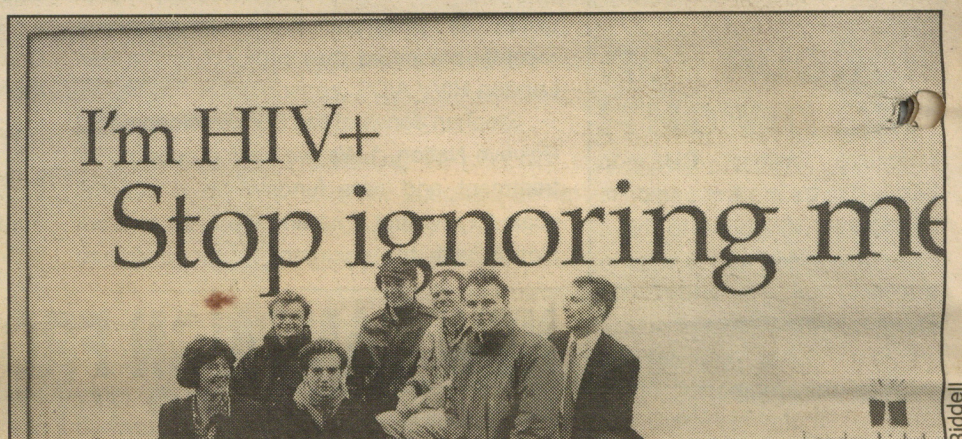
NEWS from the nation



BILLING THE VIRUS:

Shoppers stopped in their tracks and drivers had to take a second glance at the London Lighthouse living billboard poster. As part of their contribution to World AIDS Day, the poster was on display in a busy London street and various Lighthouse service users, all of them living with the virus, took turns to sit in front of the poster. The poster was part of an awareness campaign launched by the London Lighthouse and was designed by advertising agency TBWA.





Photos: David Riddell

World News

Activist denied entry to UK

A Russian sexual health worker has been denied entry to the United Kingdom. Vladimir Matyushen from the Aesop Centre for Sexual Health in Moscow had hoped to visit London in December to make contact with the HIV and sexual health professionals and to learn more about work being done in Western Europe. Positive Nation has seen a transcript of the interview he was given at the British Consulate in Moscow and understands that a judicial review of his case is being sought on the grounds that the questions he was asked about his sexual relationships were irrelevant to his application.

The British Ambassador in Moscow refused to uphold his appeal against the decision to deny entry on the grounds that he was not satisfied with the purpose of the visit. Stonewall Immigration Group have taken up his case and are considering taking the case to a judicial review.

HIV Centre Bombed

A bomb has been exploded outside a residential centre for people with HIV in Thailand. The St Camillus Foundation opened in 1993 and has been the focus of protests from villagers in the Nonthaburi province. Since the bombing and a subsequent gun attack the centre has been forced to relocate and has been unable to provide residential services for some months. The International Gay and Lesbian Human Rights Commission is calling on the Thai authorities to accept that relocation is not the solution to the problem and urging them to offer police protection to such centres as St Camillus.

Beijing

Authorities in Beijing have been carrying out random HIV tests on the student population according to reports from Reuters. 10 students at the city's university were given positive diagnoses during spot checks recently. Leading expert Zeng Yi has called for a programme of HIV prevention work to be carried out among the student population.

The State Education Commission started a special course to spread knowledge about prevention of AIDS on university campuses last September.

China diagnosed 820 people as infected with HIV in the first nine months of 1995 compared with 531 for the whole of 1994.

Since the first case was reported in 1985, 2,594 people have been diagnosed as HIV positive.

Chicago

Govenor Jim Edgar has released an Illinois prison inmate who is dying of AIDS related illnesses.

Derek Green, who is serving time for burglary at the Taylorvile Correctional Centre, will be transferred to the Sunset House, a hospice for people with HIV.

"From the information we've found out, the Prisoner Review Board had unanimously decided against Derek," Julie Justicz, a lawyer with the AIDS Legal Council, told the Chicago Tribune. "The governor basically went out on a limb to rule in Derek's favour."

Green's release marks the first time in more than four years that an inmate with AIDS has been allowed to leave an Illinois prison before the end of hissentence.

None of the six people living with AIDS seeking emergency release from prison since 1992 has been released until now.

Justicz argued that Green was a special case. She said her client is so ill that he floats in and out of lucidity and may not even have realised that he was scheduled to leave prison.

Green, 33, can't walk, talk or feed himself. Releasing Green would save the state between $80,000 and $100,000, it is claimed.

positive nation recruitment

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PUZZLES N STUFF

The magazine for children living with and affected by HIV and AIDS

Empower Publishing, the people who bring you Positive Nation are launching a bi-monthly magazine for children living with or affected by HIV and AIDS, their parents, family and friends.
We need writers, journalists, illustrators and photographers to work with us on preparing the new title for launch in mid March. If you work with children, have an interest in the field or would just like to get involved, then send off for more information. You don't have to have worked in publishing before, at Empower we believe communication is about having something to say. If you think you have something to say we would like to hear from you.

For further information write to: Dominic Gough
Managing Editor, Empower Publishing (HIV) Ltd
Southbank House, London. SE1 7SJ

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For details and application form write to: **Personnel, SACH, PO Box 17, Brighton, BN2 5NQ**

All application forms will be sent on Tuesday 30th January 1996 and requests will not be accepted after that date.

Completed forms must reach us by the morning of Friday 9th February and interviews will take place on Monday 19th February. Interview and relocation expenses are available where appropriate.

The post is advertised under section 7 (2e) of the Sex Discrimination Act 1975.

SACH is striving to be an equal opportunities employers.

Sussex AIDS Centre and Helpline is a registered charity (no. 1044181) providing care and support to people directly, or indirectly, affected with HIV/AIDS and providing health education to the local community. We welcome donations and potential volunteers.

sussex aids centre

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£23,520 - £25,401 pa inc
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The post which is based at Laurence House in Catford, SE6, is currently funded until April 1996 but further funding is anticipated on an annual basis.

For an application form and information pack please contact the Social Services Human Resources Unit on 0181 695 5390 (24 hour ansaphone service). Please quote the reference. We want to employ more disabled people. If you are disabled and want to know more about job opportunities in Lewisham, phone Sabre anytime on 0181 690 3343.

Closing date for application forms: 9th February 1996.

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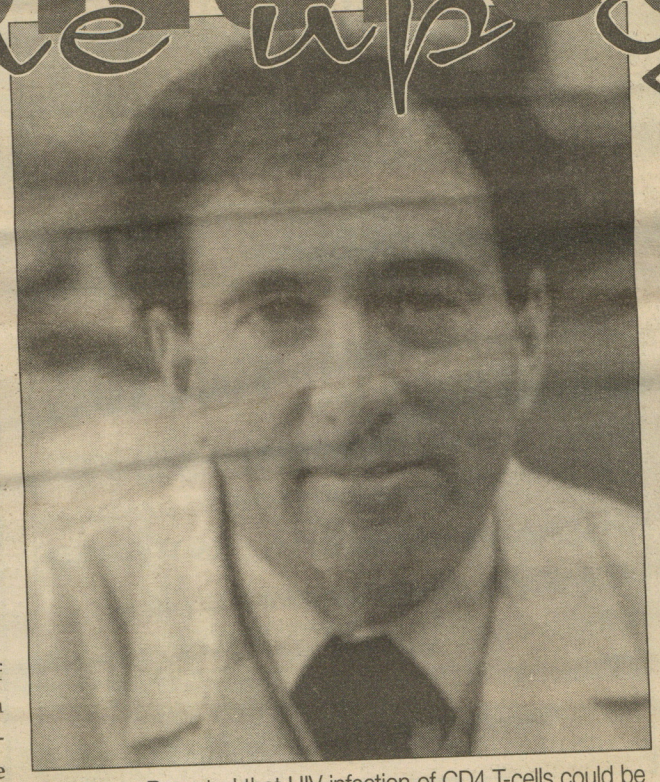
positive nation

Helping you to help yourself.

IMMUNOLOGISTS Come up guns

On December 7th **The Guardian** newspaper carried a story about a major advance in AIDS research. Behind the story there is a long saga of research going back to the mid 1980's, which with this breakthrough, may bring about a whole new area of therapeutic intervention for HIV infection and indeed may completely change our treatment.

This research centres around interactions between the two main groups of T-cells; CD4 T-helper cells-which HIV infects-and CD8 T-cytotoxic cells whose job it is to seek out and destroy virally infected cells(*see 'The Science of T-Cells', Positive Nation No.1.*)



Jay Levy : Reported that HIV infection of CD4 T-cells could be inhibited by the presence of CD8 T-cells. (Pic: David Powers)

Back in 1986 Jay Levy, Professor of Immunology at the University of California, San Francisco, reported that HIV infection of CD4 T-cells could be powerfully inhibited by the presence of CD8 T-cells. A series of experiments lead to the conclusion that it wasn't the CD8 T-cells that were inhibiting HIV but rather some factor that they were secreting. Levy tentatively called this CD8 Antiviral Factor. Ever since then a few groups of immunologists have been struggling to identify exactly what this factor is, in the hope that it can be used to hold off HIV's onslaught on the immune system. Progress has been slow and it seemed that most other AIDS researchers, at best ,had only a casual interest in Levy's work. Max Essex, head of the Harvard AIDS Institute at the Harvard School of Public Health explained that, *'Years and years went by with no one paying attention. My impression is that people didn't really believe it all.'*

However the search for the identity of this mysterious factor now seems to be over. Researchers at the Paul Ehrlich Institute in Langen, Germany reported in the December 7th edition of the Science Weekly *Nature*, that they had discovered that the CD8 Antiviral Factor is in fact a molecule which is already known to immunologists as **Interleukin 16** (IL-16). Interleukin 16 was first described in 1994 by Scientists who were conducting research unrelated to HIV. It is one of a number of molecules called cytokines that have a complex role in the immune system. These cytokines, IL-16 included, are released from cells in the form of a flood of tiny protein molecules and act as chemical messages between neighbouring cells.

In the same week as the *Nature* article was published , research findings from two collaborating teams, one at the National Institutes of Cancer in the US and the other at the San Raffaele Scientific Institute in Milan, Italy were described in a commentary in the American journal *Science*. The research paper published by Science a week later in the December 15 edition described the identification of three more cytokines produced by CD8 T-cells which also inhibit HIV. These are **RANTES, MIP-1alpha** and **MIP-1beta**

Already other cytokines involved in the immune system are in trials to see if they have any therapeutic effect against HIV. These include interleukin-2 (IL-2) which is being studied as a drug to activate and boost numbers of T-cells, and **alpha-interferon** and **gamma-interferon** which are part of the body's natural anti-viral defences. However the exciting thing about IL-16, RANTES and MIP-1 is that when they are combined together, their effects on HIV in the test tube are so dramatic. The editors of *Nature* thought the research was so important that they invited top AIDS scientist Anthony Fauci of the U.S. National Institutes of Allergy and Infectious Diseases to write a commentary on the research to accompany the article.

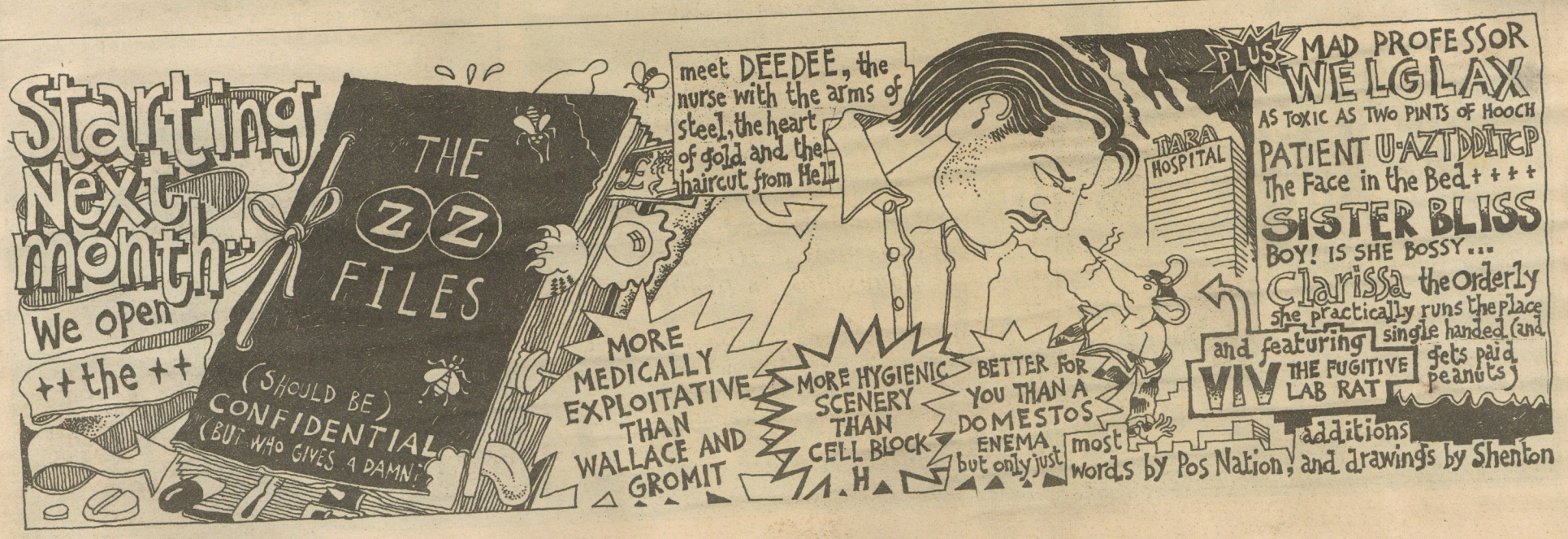
Fauci underlined the importance of this discovery in opening up our understanding of how the immune system tries to cope with HIV. In particular it may well turn out to be the case that people who remain well with HIV infection for many years are producing excessive amounts of IL-16. Indeed high CD 8 T-cell counts do seem to be a feature of those who do very well. What's more when monkey are infected with their equivalent of HIV, SIV, they never seem to get sick. Interestingly monkey CD8 T-cells produce high levels of IL-16 that may protect them from developing AIDS. If the production of IL -16 and the other cytokines trails off in humans over time, it could turn out to be this that causes some individuals to experience a progression towards AIDS, while others remain healthy for years more. In the hope that IL-16, RANTES and the other cytokines may turn out to be the key to holding off AIDS it would seem logical to monitor their levels in people's blood, topping them up with extra amounts if they start to fall.

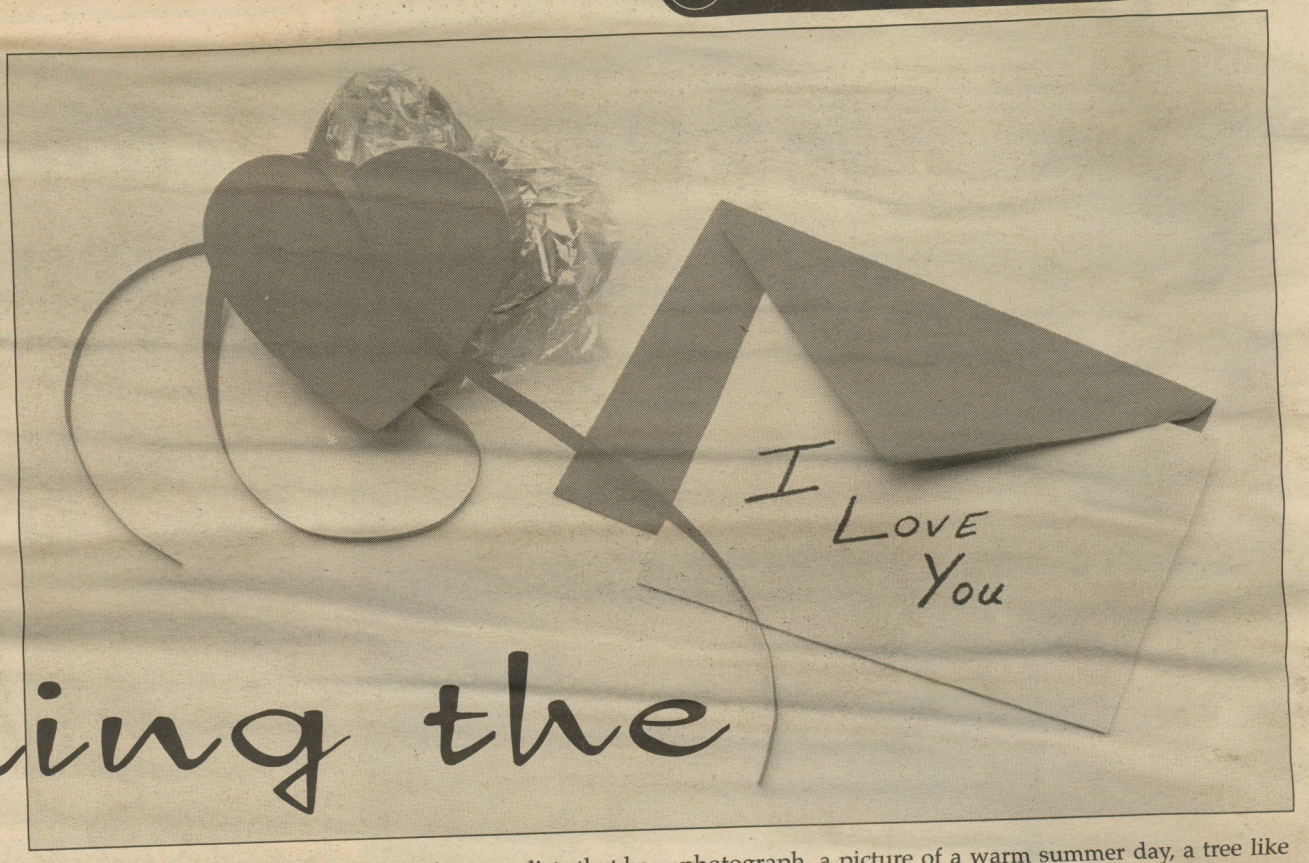
There is, however, another issue. IL-16, RANTES and the MIP-1 cytokines won't have evolved as part of our immune systems and the purpose of suppressing HIV, their effects on HIV are most likely to be merely coincidental. Instead they are there to do the job that cytokines do - to relay messages between cells. There are many different cytokines in the immune system which work together in a complex network of communication between different white blood cells. If one cytokine is suddenly increased dramatically it could disrupt the delicate balance of that complex network reeking havoc on the immune system and potentially having catastrophic effects.

Fauci issued a note of caution on the discoveries saying that *'More than a decade of experience with HIV has taught us to be conservative in our projections of success until properly controlled clinical trials have been performed.'*

In contrast Max Essex, head of the Harvard AIDS Institute at the Harvard School of Public Health was quoted in the *Science* commentary as saying *'If I was the typical pharmaceutical company I'd be looking at all of these. I wouldn't be sitting on my butt making one more derivative of AZT.'*

Gareth Hardy - Science and Medical Writer





Warming the Frost

by Mark Platt

The window was frosted over, but Peter could still make out the postman's form as he disappeared out of view. More cold letters on the mat. Cold letter, cold contents. Oh well, it had to be expected; people didn't know how to react these days, all the formality of old had been usurped by a modern sense of compassion which carried none of the order of those more rigid times. That was his grandmother's comment when his grandfather had died. She'd observed the rituals, but as she frequently commented, nobody else knew the rules anymore, so the observance was a lone one.

The first cards had arrived the day after; almost as if people had already known that it was going to happen and had been prepared, almost to the point of obscenely presuming the date. After all, even Peter had been taken by surprise by the sudden departure; but even so, the cards had arrived the very next day. Not in the morning, that would have been too dramatic, but in the second post. The winter frost made them cold and Peter was reminded of his grandmother, cold in the church, dressed in her best frock and made up as in life; but cold to the touch of his young lips. The cards in their chilled envelopes gave him a charge, a reminder of something deep and buried.

They didn't even seem to him as he carefully opened each one to see their scribbled originators identification. Each card seemed to echo his grandmothers lament. No messages other than those already printed, and not one of those bore any relation to the life whose end they were meant to commemorate.

Still, ever pragmatic, grandmother would always open each one, read it carefully and then hum a little noise; not quite approval, but not dismissal either. A little like an control check, silently marking off all those names from whom a small token of respect was demanded. Almost in chord, he did the same, mentally checking off the names of friends as their signature were discerned; John, Paul, Tim and Peter, the list was similar to the party lists that he had composed in less colder times.

The warmth of the envelope didn't really register, it took a few seconds before the light but tangible feeling made its presence known. The envelope was no different than all the others. A simple white affair with bold but obviously hand written text on the front.

But it did feel different; it had no apparent weight, and the warmth was now physically manifest. Not quite a sensation though, more an internal feeling, in his fingers but not in the article itself.

He wasn't certain, but tentatively he turned the envelope round. The address was clear, in strong and bold hand-writing, almost like.. no he'd been there all the way through, he'd seen the way in which the hand-writing had changed, gradually deteriorated to the stage where without a guide it was only slightly more than scrawl.

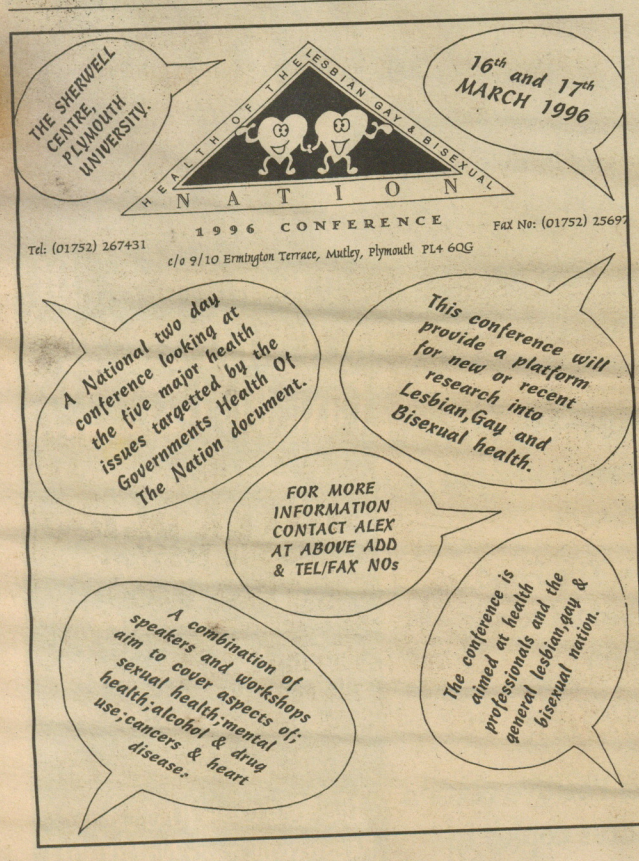
Still, the feeling remained; the seconds seemed like minutes, the feeling from the envelope never changing, almost like the warmth of a hand-shake, a soft and calming touch. He carefully turned the envelope round and gently, very gently pulled at the flap that sealed the contents in their warm shelter. The flap gave way quite easily, almost as if it had not been properly sealed, as if the glue had vanished at the first hint of strength.

The contents appeared without any ceremony; a small photograph, a picture of a warm summer day, a tree like the one in the garden, and two figures, one with its arms wrapped round the other. Behind them, the summer sun hung low but strong in the blue sky. The smiles on the two faces in accord with sun were glowing, beaming at the unseen photographer.

Peter recognised the photograph immediately, he'd looked for it for days, turning the bedroom upside down in a fruitless and ultimately painful search. He could have stood there forever, lost in the joy of being reunited with a treasured memory, but something tugged him back to reality. Almost without thinking about it, he turned the picture over, and there in big bold black ink, in strong and dramatic form, it almost stared him back... Remember, I love you.. always.. John.

The questions whirred round in his head, who, how, he'd been with him all the way through, every day at his bed-side. For an instant he thought he could see anothers' hand in the writing, but then all of the turmoil in his head cleared; he felt the warmth of the picture as it moved from his fingers, to his arms, holding him, caressing him.

The sun was low in the winter sky, its glow still weak after the harshness of the morning; but as he looked up, he could see a few rays breaking through the light mist, warming the cold ground, offering a promise of the summer that he had been promised would come.



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The Food Chain supports Positive Nation in their work and distributes copies to service users each month.

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Darling Jeffrey



PHOTO: MICHEAL GINSBERG

Boys in the band: left to right, Darius, Sterling, Jeffrey and Steve will take you on the Roller-coaster ride of the year.

Set in New York this 1990's 'romantic comedy' left me feeling that I had just ridden an emotional roller coaster. From the opening scenes when Jeffrey(Steven Weber,) shows how complicated sex has become during the Aids crisis, which leads him to decide 'I'll give up sex ' to the admission by the man he fancies,Steve(the gorgeous Michael T. Weiss) ,that he is Positive,here at last is a film that shows the confusion, fear and 'black humour' that exists in our own community at this time.

On turning for guidance to his friend Sterling (Patrick Stewart) whose boyfriend Darius (Bryan Batt) is also positive and a cer he hears "you're gay, you're single...It isn't pretty."

The film carries you at a breathtaking speed from the delights of a 'Hoe Down for AIDS', with dancing waiters in a routine that Busby Berkley would be proud of ,through cruising at a memorial service,to a fantasy telephone conversation with Jeffreys' parents about phone sex to a swipe at the established church (where Father Dan is obsessed with sex and Broadway musicals) and finally Sigourney Weaver , a New Age Guru whom Jeffrey turns to for enlightenment (which means buying her books and Tapes.)

Taking in 'Stonewall 25' with banners such as" Designers against AIDS ", the side effects of A.Z.T. on Darius and Mother Teresa on the piano, this film pulls at the strings of your heart.

Patrick Stewart is absolutely brilliant. The emotions of love and anger he shows in the final Hospital scene makes for one of the most powerful performances of the film.

This film version of Paul Rudnicks off Broadway play will make you think , laugh and move you to tears.

Take a friend, your lover, someone you fancy I dare you....

Don't miss this one, if it's the only film you see this year..

Jeffrey has been selected to open the 10th London Lesbian & Gay Film Festival on March 21st.

Jeffrey opens at M.G.M. Shaftesbury Avenue on 22nd March.

General Release in April.

Ibiza Cares



Show stopping: The fund-raising event was a foot tapping success

***Barry Clarke**, our jet setting Art reviewer heads off to Ibiza to meet Clarke Peters and his friends*

On Saturday November 23rd 1995 I left behind me a cold wintry day in London to arrive on the sleepy (it being winter), sunny shores of the wonderful island of Ibiza set in the glittering Mediterranean.

I was on 'the white island'(as it is known locally) to help prepare celebrations for World AIDS Day on December 1st. It was to prove to be an educational time and lots and lots of fun!

My hostess with the mostest was Susan Elliott, head of the Denholm Elliott Project, who was there to meet me at the airport to zoom me off to Ca'n Bufi situated on the eastern coast of the island. Ca'n Bufi is a fifteen-roomed holiday resort that people living with HIV/AIDS can visit for respite during the cooler winter months, and a summer paradise for all during the summer. En route to the resort I was given an indication of some of the more nerve-racking tasks Susan had in mind for me: A television interview in Spanish and a question and answer session at the local Institute, again in Spanish. Luckily I speak Spanish but I had never been on television before! However it was to be a success and was aired twice in one week. Alas! only in the Balearic Islands (Mallorca, Menorca, Formentera and, of course, Ibiza). Never mind! At least I've had my 15 minutes of fame. (20 minutes actually!) And I wasn't half as nervous as I had expected I would be.

That night I slept like a log, even with these things weighing heavily upon my mind. On Sunday I met a sunny array of characters who do a wonderful job as volunteers for the Project, making jams and marmalade, selling tickets, cooking, ferrying people here, there and everywhere etc. etc. And they must all be lauded with praise. Please forgive me for not mentioning names, but there are just too many, and I would be afraid of missing someone out.

The week went very well as far as ticket sales were concerned, and our performers who donated their time and talents arrived on Wednesday, in time to rehearse for our World AIDS Day show on Friday December 1st. They were namely Clarke Peters (whom I had just seen enjoy success playing Nat King Cole in the West End), Paul J. Medford, Pearly Gates, Dollie Henry, Claudia Cadette and their musical director Peter Churchill and producer Ulla Allen.

I feel we were well supported by the citizens and ex-pats of Ibiza having an attendance of over 500 people that night at the Ibiza Casino, who also donated their theatre for the night to the Project.

The show that was presented to us was entitled "Clarke Peters and Friends" and the best words for what I encounterd are "perfect" and "slick". It was a song and dance revue with such classic songs as "The Man I Love", the upbeat "It Don't Mean A Thing If It Ain't Got That Swing" and "This Place Is Jumping!" as well as many more including the songs of the wonderful Nat King Cole.

Without a shadow of a doubt everyone enjoyed themselves to the hilt. The only criticism, and it isn't really a criticism at all, is that I could have watched a lot more because the voices I witnessed that night were marvellous, and the dancing stunning, especially when Paul J. Medford tap-danced on our table!

A hearty thanks must go out to all and sundry for all their help in organising the event and to all those who gave their support to World AIDS Day in Ibiza. My personal thanks go out to Susan Elliott for the new experiences that passed my way!

As the motto of the Denholm Elliott Project says "Ibiza Cares" or in Spanish "Ibiza Se Preocupa",and it surely proved it did that week.

STAND UP FOR YOUR LOVE RIGHTS!

"What is safe sex?"



PHOTO: DAVID W.KIDD

I have a confession to make - I don't think I know!

Ask ten gay blokes in a bar, and the most likely answer would be 'wearing a rubber if you want to fuck'. Ten years of Health education work, and particular the gay targeted initiatives by groups such as GMFA and Rubberstuffers over the past couple of years have raised the awareness of safe sex amongst the gay community, so that most people now broadly know what 'safe sex' is. Or do they?

As a positive gay man I am increasingly unsure what safe sex is. Should I still insist on rubbers when fucking with another positive guy? What about rimming - that's low risk isn't it (well it is according to all the safe sex leaflets I've amassed over the years)? What about watersports?

The sad truth is that even three years after HIV prevention work has been 'regayed' to use the current jargon, it has only been regayed for part of the gay community. The needs of positive men for accurate safe sex information have been all but ignored by the HIV/AIDS industry.

Practically all safe sex initiatives have been geared to meeting the needs of HIV negative men. The needs of positive men for accurate safe sex information have been all but ignored by the HIV/AIDS industry. In fact its hard not to conclude that they've been sacrificed at the altar of the regaying of HIV prevention work.

Slowing the development of AIDS amongst positive men should be as high a priority as reducing the spread of HIV. Yet, with the exception of one worthy, but not very useful or informative leaflet (Sorry, London Lighthouse!), very little has been done to educate and empower positive men to enable them to have as good and safe a sex life as any other gay man. This is compounded by the often crass advice handed out by many GU clinics telling us to always wear a rubber and to not feel pressured into telling any sexual partner of our HIV status.

Its high time that positive men had access to information which empowered them to make the right choices about sex for themselves.

Sex is an important part of most of our lives - even when we're ill. Indeed, it can play an important role in helping us to overcome depression and helping maintain a positive attitude to life. We should have access to the best quality information so that we can have the hottest sex possible, comfortable that the personal decisions we've made have been taken using the best information available.

What should this cover? At the very least, it should include advice about the likely levels of risk to ***our*** sexual AND general health from doing different things. It should also include advice about safer sex within relationships where one partner maybe, or is positive. This last point is important, given that research suggests that quite alot of the guys who are testing positive are guys within steady relationships.

Paul Ward: Seeking more clarity in safer sex advice for gay men.



The safer sex advice should cover issues such as :

- What is known about the risks of positive guys fucking each other without rubbers? Lots of unprotected fucking goes on with guys having made an informed judgement about the benefits as well as risks which this carries. But how easily available and how good a quality has the information been upon which we've all made these personal choices?
- What about sucking? Is this as low risk for us, as it is for other guys? Well maybe not if it carries with it a risk of picking up an STD which may be more difficult to treat if our immune systems aren't working properly. Are the risks (if any exist) of swallowing any more or less for us positive men?
- Is rimming as safe for us as negative men. Almost certainly not, as it carries with it a risk of catching cryptosporidium, Hepatitis, and countless other bugs which could wreak serious havoc with our general health.
- What about other general bugs which can be caught through sex? How many times have we been told about the risks of catching CMV through sex? Very rarely, yet, if you don't know your CMV status, and you're HIV positive it would be well worth testing for it. A negative result, whilst statistically improbable, would be worth holding on to, and you might wish to modify your sex to try and ensure this.

I am sure that there will be those who argue that it is naive to expect that definitive information is available in all of these and other areas. Yet, research shows that gay men make very sophisticated and highly personal sexual choices based on the information available to them. The least we deserve is access to the information, even if it is at best inconclusive, or at worst conflicting.

It is so important that people have access to this information that Positive Nation will next month give prominence to the safer sex information which is available, and which has been developed by Health First.

Elsewhere in this newspaper, there is a feature about the deplorable conditions for positive m[illegible] in some bars and clubs in the London gay scene. Fifteen years into the HIV/AIDS pandemic it really isn't good enough that gay venues, making money out of positive men as they do, in some cases fail so miserably to provide for some fairly basic needs.

Yet, neither of these should be so surprising as there isn't a positive voice in this country to lobby for the interests of positive men when it comes to sex - whether it doing about doing it safely, finding it though the scene, or using related health services.

Organisations and groups such as Terrence Higgins Trust and the UK Coalition do an excellent job in often difficult circumstances in lobbying and advocating for people with HIV in general, but in recent years have been less vocal when it comes to sex. Gay Men Fighting AIDS (GMFA) have been very vocal on the sex front, but largely have been Gay Men Fighting the Spread of HIV (GMFSH) - a vitally important, but nonetheless different issue.

Enough is enough, positive men ought to take a stand in arguing for their own interests, and try and secure some much needed improvement and change. Put simply, its time to stand up for our love rights!

The Awards.

As this is the first issue of the Nation this year, we like all other papers have presented our awards for deeds good and bad, done in '95. These were announced on the 'airwaves ' during the run of the 'Positive Zone' on Freedom FM during December 1995 and early January 1996. Here is the complete list of awards as nominated by readers of Positive Nation and listeners of the Positive Zone, with a few thrown in for good measure by the editorial team at the Nation and on the Positive Zone.

THE T-CELL AWARDS.

Special awards presented to Individuals or Organisations that have excelled in there contribution to the HIV/AIDS community.



Individuals.

Paul Mayho
MDR - TB. Isolated ,wrapped in cling film.

John Campbell
The UK Coalition of People Living with AIDS.

Jean 'T' & Robert 'Bimbett'
For the first Positive 'Cupid Calling '.- (A 'Blind date style show)

Sion keeling-Dean
Freedom FM. For having the vision to set up' Safer - Sex Radio'

Tim Purcell
Programming the ' Positive Zone.' A world first positive radio show'

John Gleeson
Fund-raising for HIV and AIDS charities 'Market Tavern'

Terry Tucker
Fund-raising for HIV and AIDS charities ' Halfway to Heaven & Two Brewers'.



Organisations.

The Elton John AIDS Foundation.
Fund-raising.

Crusade
Hardship fund.

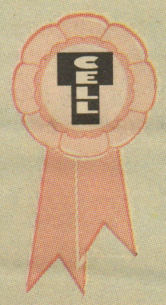
Body Positive.
10 years and still going strong.

Food Chain
Serving the community and keeping us fed with good grub.

The Sisters of Perpetual Indulgence.
Fund raising and awareness and for just being sisters.

Rubberstuffers
New condom and awareness campaign.

'GOLDEN T-CELL'



H.R.H. Princess Diana
Dispite telling the 'kids' people with HIV have cancer. For all her continuing good work, she will always be 'The Queen of our Hearts.'

THE BIO-HAZARD AWARDS.

For unacceptable practices and outstanding ignorance and bigotry towards the HIV community.



Harrods.
HIV testing staff who work in the food hall.

Texaco.
HIV testing of staff.

News of the World, The Sun, The Sunday Times :
All for spreading fear and miss information over the years.

... and you're still confused?

Open your mind with the *Continuum* magazine

Regular features:
- **the latest alternative AIDS research**
- **HIV debate: does HIV cause AIDS?**
- **side effects of popular drug treatments**
- **health and nutrition**
- **holistic and non-toxic therapies**

plus: interviews you won't find anywhere else, lifestories, book reviews, conference reports and a sideways look at the news

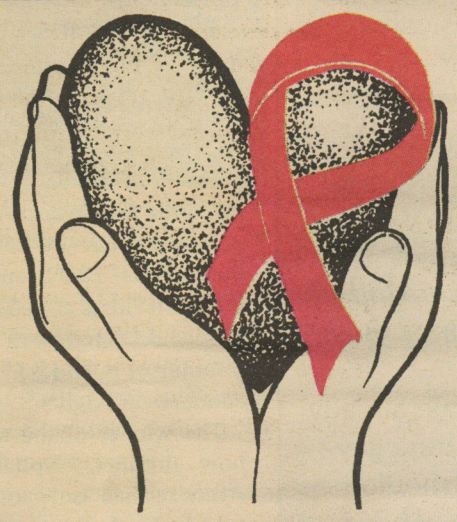
Missing Virus reward still not claimed!

In the Jan/Feb issue:
- **Where have all the T-cells gone?**
- **Do you trust the HIV test?**
- **The EAT video reviewed**

For a FREE trial copy of the magazine phone 0171 713 7071 or write to the address below

continuum
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SHAMING

What The Gaypers Say

"I have generally found the gay scene to be very supportive towards those affected by HIV.

The primary evidence is the constant number of benefits and fund-raisers.

On a more individual level, as businesses, gay venues treat HIV positive customers the same as any of their other customers, which is understandable up to a point when the individuals are asymptomatic.

Unfortunately many venues aren't equipped for people who are 'physically' disabled by HIV or have specific needs, such as seating, acceptance of positive discount and non smoking areas. Basically the 'usual room for improvement.' I'm sure some improvements could easily be made. These need to be pointed out to the owners of venues."

David Hudson
Deputy Editor 'Boyz'

"HIV positive people already have a presence in the gay community and it should be recognised that they have different outlooks, and awareness. HIV/AIDS has had its impact over the last 10 years and its effects have been felt in the gay community. It's important to remember though, that this is far less a 'movement' than it is a medical condition and so is more personal."

John Bakke
Editor 'THUD'

Paul Ward went out onto the so some of London's lead

Some of the best known bars and clubs on the London gay scene fail to meet many of the most basic needs of gay men, let alone the needs of positive gay men, a Positive Nation survey reveals today.

Many venues have turned a blind eye to making their services HIV friendly, even though they have often raised thousands of pounds for HIV/AIDS charities.

The survey of bars and clubs drawn at random from across the capital shows that high entry charges and primitive toilets, which would not have been out of place in medieval London, are sadly the norm in many of the places visited.

Conducted during October and early November, the survey included well known clubs such as GAY and Love Muscle, leather clubs such as The Backstreet, and well known bars used by many positive men, including The Black Cap, The Coleherne and The White Swan.

Each venue was assessed in a number of ways which recognise the particular needs which positive men have, particularly those of us who are symptomatic, or who have AIDS.

These included entry charges and the price of a lager, particularly important for those positive men who have had to give up work, and where the cost of a night out might be directly competing with paying the gas bill or the supermarket bill. In addition, the survey covered access to seating, the overall atmosphere, and the state of the toilets.

The Peckham based Attitude bar, walks off with the award for the most HIV unfriendly bar in London - having an outrageous £3.00 entry charge (even though it closes at 11:00) and an additional coat check charge, mandatory on their popular and well known 'Underwear Nights.'

The winner of the readers' poll in the now defunct Capital Gay last year, Attitude has only one cramped toilet cubicle for the entire club, the washbasin serving as a urinal. On the night we visited there was no loo roll, and no paper towels or drier. There was however a urine soaked floor, a damp smell, and a somewhat lengthy queue of men to be negotiated before getting into the loo.

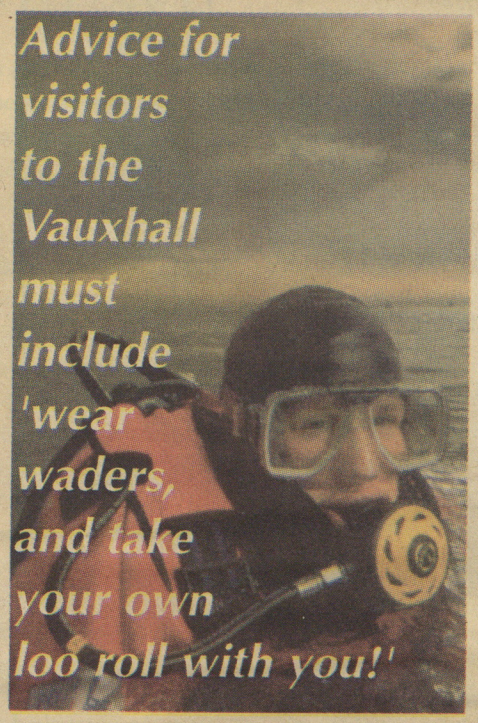
Compounding this, there was no seating of any kind in the main bar area - presumably so more paying punters can be crammed into the bar.

Some other bars were little better, although none of these quite managed to plumb the depths to which Attitude sank, and most other bars refrain from charging mid-week. Notably The Royal Vauxhall Tavern, which, although having some seating and free entry charges for at least part of the week, had flooded, dirty loos and a single cubicle with a blocked toilet with no seat and no loo roll. Advice for visitors to theVauxhall must include 'wear waders, and take your own loo roll with you!'

Also worthy of note is the one of the granddaddies of the London scene - The Coleherne. On the night we visited, there was little seating, a smoky environment, and a loo which was locked. Whilst this did prevent 'loitering', it also made the process of going to the loo a somewhat laborious process - requiring a trip to the bar to get the key. Hardly ideal if you get 'caught short'! On the night we visited there was no loo roll, and only a partial loo seat. It was hardly worth all the effort!

By contrast, Central Station must win the award for the most HIV friendly bar in London. With free entry, a welcoming smoke free atmosphere and plenty of seating, the bar has a lot going for it. The loos are fine - if you don't mind using the cubicle in the 'Ladies'. It was clean, dry and had everything you could need - even some interesting graffiti.

Sub Station South also offers free entrance before 12 on most nights and a reduction for 'Positive Discount' cardholders. The loos are well looked after on the whole and the lock-ups do work and are well stocked with loo paper. The seating area in the front bar is reasonable with extra seating around the dance floor and on separate levels depending on the night. 'Fist' was the night we went on and was well planned. Ventilation was good and so was the overall atmosphere .



Also worthy of mention is The London Apprentice, which has clearly made efforts to recognise the particular needs which many positive men have. It has plenty of seating, an unsmoky atmosphere, and at least four different loos, although the quality of these does vary.

Across all the bars visited there was little to distinguish between them in terms of midweek entry charges (largely free) and drinks prices.

On the whole, the clubs fared rather differently. The Saturday night mega venues all offered a good, if expensive night out. The club promoters should seriously consider reducing their entry charges to positive men. The overall cost of a night at any of these is unlikely to leave much change out of a tenner - a lot of money if you're living on benefits. The loos at Love Muscle, and to a lesser extent GAY, need some attention and should be rapidly improved.

Improving the loos should also be a priority for The Block when it reopens, as its old premises in Islington did not compare favourably with its competitors at The Anvil and Backstreet. This marred what would otherwise have been quite a good deal for symptomatic positive men.

Commenting on the results of the Survey, Positive Nation's managing editor, Dominic Gough said, "This shows that there is still much which the owners and managers of many of London's gay bars and clubs could do to improve the service which they offer to positive men. It is high time that the London gay scene fully woke up to the fact that many of its customers are HIV positive, and made efforts to recognise what this means for the service they provide."

THE SCENE

cene to look at how HIV friendly ding clubs and bars are.

The Big Saturday Night Out

Let's be clear about one thing - any of these clubs will give you a good night out. Each is very popular, and each provides that little bit extra - whether it's the raunchy stage shows at Love Muscle, the often camp as tits PA's at GAY, or the happy, nee euphoric atmosphere at Trade.

However, none of this comes cheaply, and even with flyers and early admission, a night out with a couple of drinks at any of these clubs will set you back the best part of a tenner at least. There's little between them in terms of cost.

Each offers seating, although there's more and better seating at Trade and GAY - the former having a couple of coffee and chill out areas and the latter having galleried seating, giving a good view of the stage. Love Muscle has some seating, but it does not appear to be as well integrated within the club as in the other two. It's the same story with the atmosphere - smokier at the Fridge (particularly downstairs) than at either Trade or GAY.

A visit to the loos revealed a different picture: Long queues at both GAY and Love Muscle and much shorter queues at Trade.

The GAY loos visited suffered from a lack of loo roll, but were clean and flushed properly. At Love Muscle, which had the longest queues on the night we visited, there was loo roll (at least early in the night!) but the loos as a whole were dirty, didn't flush, and had no working drier or paper towels. Neither offered a great deal of privacy.

In contrast, Trade had clean loos, privacy, and plenty of loo paper; there was also an attendant, whose job it was presumably to ensure that they were used for their intended purpose - undoubtedly one of the reasons for the queues at the Fridge.

Not being a regular clubber, the differences in atmosphere were quite striking - most friendly and welcoming at Trade and GAY, less so at the Fridge - although admittedly this will be very much a matter of personal taste.

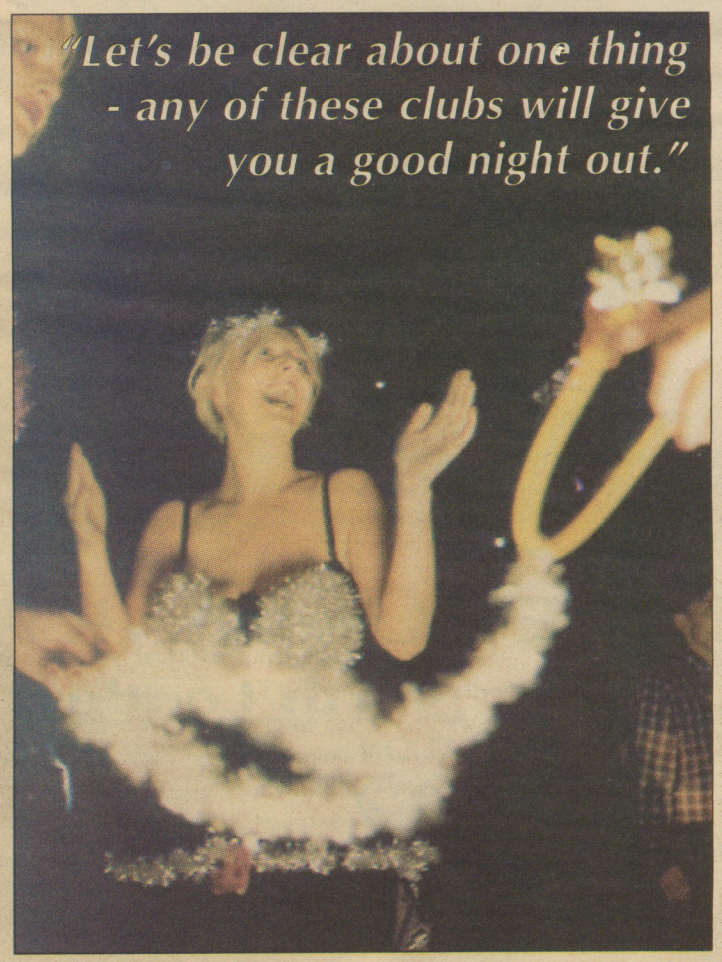
Although offering a good night out, all of these venues should look at their entry charges for positive men, and both GAY, and particularly the Fridge, need to improve the quality of their loos which are simply not good enough.

T-Cell Rating (max. 10, Min. -10)

Trade	+8
G.A.Y.	+5
Love Muscle	+2

The Leather Night Out

London's leather & uniform scene has grown markedly over the past five years and now boasts at least three long running clubs - The Backstreet, The Block (currently searching for new premises)



"Let's be clear about one thing - any of these clubs will give you a good night out."

and The Anvil. All three are used by a significant number of positive men, and all offer a 'rough' atmosphere with plenty of cruising and other pursuits.

Entry charges and drinks prices are well matched, each costing £3/£4 to get in, depending on the time and the night, and each charging about £1.50 for a pint or a can of lager. It is worth stating however, that people arriving at The Anvil after 11:15 on Fridays and Saturdays may face a lengthy wait outside if the club is full - so if you want to avoid the queue get there early.

Each has plenty of seating in the main areas of the club, although that's where the similarities end.

The atmosphere is different between the three - smoky at both The (old) Block and The Anvil, less so at The Backstreet on the nights we visited. This may be due to the hyper-efficient air conditioning at The Backstreet.

There are marked differences in the loos between the three venues. The best by some way are at The Backstreet - clean, plenty of loo paper, washbasins and drier, and privacy. In addition, there were no queues. In contrast, the worst by some margin were at The Block's old premises, being characterised by no loo roll, little privacy, a loo which didn't flush properly, puddles of urine and used rubbers, and a ten minute queue. The Anvil falls somewhere in between, with a five minute wait, only a small amount of privacy, but a clean loo with plenty of loo paper and a washbasin.

Overall, all three clubs offer the prospect of a good night out, but the managers of The Block, and to a lesser extent, The Anvil

What YOU Say!

The opinions of some positive gay men

"It totally fucks me off that in 1996, Positive people still have to take a loo roll or wet wipes whenever they go for a night out on the London gay scene!"
Simon Hall

"Being diagnosed HIV positive, and going on to develop illnesses is hard enough. Currently the gay scene, not only in London, but across the country, has yet to take into account and redress fully the specific needs positive gay men have, and by not doing so a subtle form of exclusion is felt by many."
John Campbell
UK Coalition of People Living With HIV & AIDS

"As a positive man, I expect no more or less than any other gay man. Toilets that are kept clean and in good working order. A venue that respects the need for seating and good ventilation, fulfils the requirements of the health and safety laws and doesn't rip off customers.An expensive, inaccessible, smoky and overcrowded venue is a danger to anyone and more frightening if you're disabled."
Lionel Rhodes

"Sero positive or not it isn't too much to ask for clean, useable loos with loo paper and to be treated the same as anyone else, is it?"
Barry Clarke

It's about time that bar and club owners were encouraged to plough some of their profits back into making their venues more HIV friendly.

need to further improve the loos. The anticipated move of The Block to new premises provides an excellent opportunity to improve things for its positive customers.

T-Cell Rating (max. +10, Min. -10)

Backstreet	+6
The Anvil	+2
The Block	-2

Comment

Thirteen years into the HIV epidemic in Britain, the Positive Nation scene survey makes disappointing reading. On the whole, bars and clubs have made seemingly little effort to specifically cater for the needs of positive men - particularly those of us who are symptomatic or who have AIDS.

The loos in many places are frankly a disgrace, and the entry charges to some venues eat a long way into people's income, particularly for those positive men who are on benefits.

Bars and clubs should improve the service they offer to positive men - particularly those of us who are symptomatic. To guide them, Positive Nation today launches a four point Charter for the London gay scene.

It calls on bars and clubs to:

- ▷ Review their entry charges for positive men, particularly those on benefits. (This could be linked to a more widespread adoption of the Positive Discounts Scheme.)
- ▷ Improve the quality of the toilets to ensure that all have a lock on the door, have loo roll and a seat, are clean, and have a washbasin and a drier/towels. (Having sufficient toilets to avoid the queues which exist in some venues would be an ideal goal.)
- ▷ Ensure there is sufficient seating to enable positive guys to take a break when they need to.
- ▷ Ensure that there is sufficient ventilation to ensure that the atmosphere doesn't become too smoky for those positive guys with lung/respiratory problems.

Positive Nation calls on:

- ▷ all venues to adopt this Charter.
- ▷ HIV/AIDS policy makers to incorporate this into a scheme by which bars and clubs could be accredited for adopting this. (This could work in a similar way to the now superseded Safer Houses initiative which accredited venues on the basis of their efforts to promote Safer Sex.)
- ▷ all London Boroughs to take this into account when considering applications from local bars and clubs for licences.
- ▷ all our readers to let us know YOUR views about which venues are particularly HIV friendly. We'll publish the results in a future edition.

The gay scene plays an important part in the lives of many positive men. It's about time that bar and club owners were encouraged to plough some of their profits back into making their venues more HIV friendly. Support this initiative, and let's together improve still further the quality and standing of London's commercial gay scene.

HOW HIV FRIENDLY IS YOUR LOCAL BAR OR CLUB?

Let us know, telling us what you like about it and what you don't. We'll list the most and least friendly in a future edition.
Send your views to:

The Editor, Positive Nation,
Southbank House,Black Prince Road,
LONDON. SE1 7SJ

SCORE SUMMARY - BARS

North London

CENTRAL STATION

Comment :
Welcoming atmosphere, plenty of seating, good loos.

THE BLACK CAP

Comment :
Dirty, smelly loos, smoky atmosphere, though plenty of seating.

West London

THE COLEHERNE

Comment :
Little seating, smoky atmosphere and locked loos.

THE ROYAL OAK, HAMMERSMITH

Comment :
Lots of seating, only one loo working (the other was broken) and no drier.



East London

LONDON APPRENTICE

Comment :
Good night out, plenty of seating and plenty of loos if you avoid the basement.

THE WHITE SWAN

Comment :
Plenty of seating, but you'll need to use the Ladies and hold the door shut if you need to use the loo.

South London

ATTITUDE

Comment :
Scant regard paid to any of the needs of symptomatic positive men. An absolute outrage given the entry charges, although it does have other selling points.

ROYAL VAUXHALL TAVERN

Comment :
Bring a pair of waders, and a portable loo seat if you want to enjoy a night out here.

SUB STATION SOUTH

Comment :
Good ventilation, loos and seating area. Great atmosphere and helpful staff.

BELIEVE IN Yourself



David Eason our Alternative Health Editor takes a different look at life with the virus.

An alternative approach to anything in life is achieved by casting off preconceived ideas, stripping off years of conditioning and being willing to dare!

For those of you who didn't have the opportunity of listening to the POSITIVE ZONE on Freedom FM in December, let me introduce myself. I'm David Eason, an HIV positive gay man diagnosed five years ago. I'm in good health, don't take any prophylactic drugs and have never written anything like this in my life!

Over the coming months though I am going to be writing articles that I hope will interest, provoke, inform but above all make you question just about everything you ever thought you knew about HIV, diet, therapy, health, spirituality and above all - yourself.

In the unlikely event that I use any big words I will explain them. I'm definitely NOT pc and I'm happy to say that I have no qualifications whatsoever - except that I made it through the eighties, am a long way into the nineties and fully intend to stay healthy, happy and horny into the year 2000 and beyond.

Next month I'm going to be introducing a Cut and Paste section where you can revive your Blue Peter skills and stick lots of simple, useful information all over your kitchen. I'm going to try to explain in one line what self-help books take a chapter to do and I'm going to write about anything and everything that affects us as positive people: diet, vitamins, supplements, alternative and complementary therapies, relationships with our doctors and the world in general. I am going to shine a torch into your deepest psyche and show you that even though you are a virally diseased walking disaster, there are many redeeming features in belonging to this very exclusive HIV club.

No one person has all the answers, I want to encourage your letters, questions, comments, and ideas, I will read all of them, some I will answer, some I will pass on and some will go in the bin.

Where is the starting line?

I believe that the most devastating thing that happens when we get that positive diagnosis is that all the lights in our world begin to fade. Dreams and hopes are stolen from us and we find ourselves staring into a tunnel of despair, ill-informed and without a light for a journey we neither want, nor feel equipped to undertake. A light at the end of the tunnel is the hope we search for, but a light at the beginning of the tunnel seems a much better idea. Only when we replace fear with some light and hope can we begin our journey.

All this sounds very grand and perhaps even formidable. It shouldn't be. Knowledge, personal empowerment and putting ourselves in the driving seat are the starting points. My knowledge and understanding of the issues surrounding HIV and AIDS comes from personal experience. What you take from it is up to you. What is of value - use. What isn't - put aside. Your life is your own and the moment you put my or anyone else's opinion (for opinion is all it is) above your own you have given away one of life's great essentials.

Being HIV positive or having AIDS doesn't mean we are going to die, we are going to die anyway, only when we accept death as part of life can we truly see the world as it is and as long as we remain scared of death we will be scared of life.

Body, Mind, Emotions, Spirit.

We are a lot more than just a physical body. If you like, we have emotional, mental, and spiritual bodies also, and all of them need feeding and looking after. We can eat as much good food as we like, but if we don't have a purpose, direction or meaning it's a pointless exercise. -That is what a holistic approach is all about - caring for all of 'our self'.

Spirituality is an increasingly used term these days, often used by people who don't know what it means and with the insistence that their interpretation is the right one. Bollocks! Spirituality is a personal thing. You can't have mine and I don't want yours. It is nothing more than an awareness of who and what we are, what we think and believe, formed by our own personal experiences and being at ease with that. When we are at ease with ourselves, we can be at ease with our world, and when we can do that we can do the most amazing things.

At some point, the love of self, acceptance and self-worth are going to be crucial to survival - ask any long term survivor. I'm not going to tell you how to live your life but I hope I can point you in a direction that works for you.

Every morning that we wake up we have a choice, one that NO ONE can take away from us. It's simple. What do we believe? If it's raining we can say, 'Oh what a shitty day!' or we can see the beauty in the rain. The rain will always be the rain, the only thing that is important is our reaction to it, and that is completely and totally within our control. Most of us spend our lives looking for answers. I look for the questions. When I have the question right I can usually see the answer. Start questioning!

So, there you have it. If my editor lets me in the building again, I will be back to victimise you all again next month. Happy 96 and remember: If you have just read this, you are alive.

REFERENCE

pc	Politically correct
Prophylactic	Drugs taken to prevent a condition in the first place
Holistic	Sum of the parts, treating as a whole
Psyche	Soul, Spirit, Mind.

Waltham Forest HIV/AIDS Support Group

A group for people living with the virus, who live, or work in The Waltham Forest area. Meeting weekly, the group is open to positive people, partners and carers.

For more information, contact Heather on 0181-521 7441 (24hour answer-phone)

nation

Advertising in the Nation gets you noticed and any profits go back to the community. Phone Mark or Shir for more information on 0171 582 9120

BIG UP is an organisation providing effective HIV information, education and prevention work for African and Caribbean men who have sex with men.

So what's BIG UP doing?

- Running workshops for Positive men
- Outreach work in venues where Black men who have sex with men meet
- Producing culturally sensitive and specific Safer Sex information
- Distributing our New Safer Sex Pack
- A Confidential helpline on Tuesday & Thursday evenings 6pm - 8pm ☎ 0171-501 9315

We also need more volunteers and management committee members.

WHY NOT GET INVOLVED!!!

For further information Contact: BIG UP, UNIT 75, Eurolink Business Centre, London SW2 1BZ ☎ 0171-501 9264

Helpline ☎ 0171 501 9315 open Tuesday & Thursday 6-8pm.

EUROcom HOMECARE

LONDON'S FIRST GAY HOMECARE SERVICE

ESPECIALLY FOR THOSE LIVING WITH HIV/AIDS

Providing experienced staff for your cleaning, cooking, shopping, hospital escorts.

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BODY POSITIVE CAMBRIDGE

A SUPPORT GROUP FOR PEOPLE WITH HIV OR AIDS MEETS TWICE A MONTH

FOR MORE INFO CALL FREE ON 0800 697 617 TUES-WEDS 730-10PM SAT 12-2PM

CAMBRIDGE AIDS HELPLINE

A support group for people with HIV or AIDS meets twice a month

for more info call FREE on 0800 697 697

Tues - Wed 7.30 - 10pm

Sat 12 -2

K&R HEALTH

JOINT COMMISIONING AGENCY

HIV/AIDS SERVICES IN KINGSTON.

HIV/AIDS Team.

Based at the Guildhall this team provides community health and social services.

Call the Team on 0181-547 6045

Wolverton Centre

Based at Kingston Hospital Trust this centre provides a wide range of HIV/Aids testing, counselling and support services.

Call the Centre on 0181-974 9331

Community Drug and Alcohol Team.

Services for people using drugs.

0181-549 9279

HIV Response Projects

This is a new voluntary organisation that provides practical help and support.

The response Projects is always looking for new volunteers and people to be on the Management Committee.

Call the Projects on 0181-974 9316

ARE YOU HIV POSITIVE?
DO YOU LIVE IN CENTRAL LONDON?
DO YOU HAVE A PROBLEM?

?

housing, social services, benefits, your doctor...

We hold advocacy drop-in services at

- The information Exchange (Chelsea & Westminster)
  Tuesdays 1.30pm - 6pm ☎ 0181-746 5929
- St. Mary's (Jefferriss Wing, Wharfside, Paddington)
  Thursdays 1.30pm - 5.30pm ☎ 0171-725 1560
- *Body Positive* (Earls Court)
  Fridays 12.00pm - 3.30pm ☎ 0171-835 1045

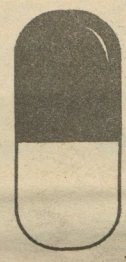
The service is available to assist anyone too ill, who does not wish to speak up for him or herself, or has been everywhere else and needs extra help in dealing with a problem.

For further information, please see the leaflets which are available in AIDS service organisations or drop in to any of the above, or phone Paul White at the UK Coalition on 0171-582 2425 Monday - Friday.

UK Coalition
of People Living with HIV and AIDS

The leading organisation of, by and for people living with HIV and AIDS, bringing the issues that matter to the forefront.

Confused about *Combination therapy ?*



Won't two drugs be more dangerous than one ?
How can I get hold of the latest treatments ?
If AZT doesn't work, why take it even in combination ?
I've heard 3TC is the best thing to take. Is that true ?

Everyone's talking about Combination therapy. Some people make it sound like a cure, and other people tell you taking medication will kill you.

In 1996 it's time for more sophisticated answers because the questions are getting more difficult for all HIV-positive people.

The treatment Action Taskforce thinks HIV-positive people deserve direct access to the best sources of information, whether that's doctors or other people with HIV, who know the facts and can talk to you inlanguage you'll understand.

That's why we're starting a series of monthly treatment forums. Whilst we'll be talking a lot about medication, the events are not intended to persuade you to start taking drugs. Our aim is to give you the information to make your own decision, and to help you learn more about current medical thinking. In addition to presentations on timely topics, we'll provide updates on the latest developments in HIV treatment and a chance to ask any questions you have.

Our first forum is on Combination therapy, and the speaker will be:

Dr Janet Darbyshire
Head of the Medical Research Council's HIV Clinical Trials Centre.

to be held at:

Quaker Meeting House,
off St Martin's Lane, 8 Hop Gardens WC2
(entrance beside the Lumiere cinema)

7.30-9.30pm Admission Free
Wednesday January 24th

TAT
TREATMENT ACTION TASKFORCE

Sponsored by NAM, Terrence Higgins Trust, and Network of Self Help HIV / AIDS Groups.

The Treatment Action Taskforce is a group of individuals who seek to enable people living with HIV and AIDS to improve their life expectancy and their quality of life where they have been reduced by HIV infection by mobilising people in the UK in activism, in advocacy, in education, in science and in government. TAT seeks to improve treatment possibilities by expanding access to choices, information, practical options and decision making processes.

The Terrence Higgins Trust

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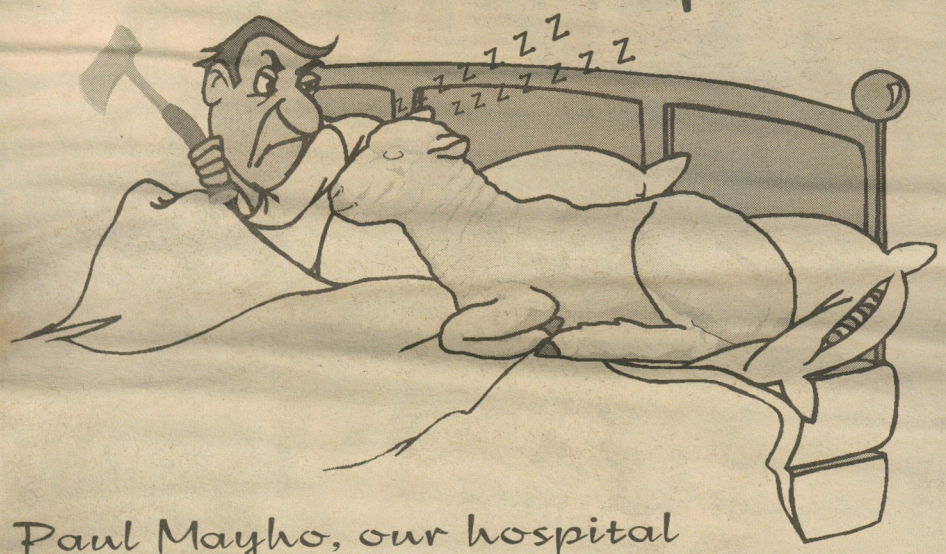
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COUNTING Sheep



Paul Mayho, our hospital correspondent, gets to grips with trying to maintain your sleep patterns while staying in hospital.

I don't know about you but I like my own bed. {contrary to public belief. Ed} There is something very special about one's own pillow. Unfortunately a stay in hospital can deprive us of those little luxuries that mean so much and a good night's sleep. Those plastic covered mattresses, sheets instead of your old faithful duvet and a bed that rattles every time you move. Not to mention other people moving about, snoring, coughing etc. These things do not make for a good nights sleep.

Having been woken up several times through the night then finally having got to sleep around five in the morning, you are woken at the crack of doom by a domestic with a bowl of soggy corn flakes. There is no place like home!

Usually a visitor staying in hospital will be offered medication to help them sleep if they ask. However this route does not always leave one feeling refreshed the next morning and a residual hangover is not unusual. If you would rather not take medication to sleep there are a few other things, tried and tested that may help you. It is scientifically proven that warm milk will help you sleep this is due to the lactose in the milk which has a calming affect. Hot chocolate in my opinion is even better. The attributes of milk combined with chocolate produce a feeling of contentment. It is also a scientific fact that chocolate produces a hormone in the body that is similar to the hormone produced after sex. (Why do you think so many housewives eat chocolate!)

If you are really attached to your own pillow, get someone to bring it into the hospital for you. Indeed, why not have your own duvet brought in also if the sheets remind you of a weekend stay as a child at Grandma's. And if you like your bed to be made before you go to sleep, remember you may have been in it all day, just ask.

Once you have got off to sleep, it is quite possible that you may wake up feeling cold and wet, laying in a puddle of water, a night sweat. If this is a problem then it might not be that practical to stick to your own linen. I suggest instead raiding the pyjama cupboard, in the first instance and find something that fits. (A feat in itself, I have never seen anyone over 20 stone on an AIDS unit, although to rummage through the linen cupboard you wouldn't think so). This will give you something to change into at a moment's notice.

Once again, you do not have to lay in it. Ask for help, someone else will make your bed for you. That's why you're in hospital, to be supported.

It has to be said it is easier to sleep in a single room than an open ward. I personally recommend pulling the bed curtains around you just, for a bit more privacy if you do find yourself on an open ward. As for noise, that is a difficult one. The only suggestion I can give here is ear plugs, which may or may not be practical for you. It is difficult to be tolerant when you are not feeling well and are very tired and despite the urge to shout at or smother, with a nearby pillow, a noisy bedfellow, this course of action usually only results in waking everyone else up.

Of course it just may not be possible to sleep. I usually find myself in the day room sat with the night staff watching television. And more often than not there are other patients in there who can't sleep either. Hospital is an exhausting experience and it is not a comfortable or relaxing place. I have come out of hospital many times feeling more tired than when I went in and there really is no place like home. People are different and after a few stays in hospital, having got to know some of the staff and a bit about the routine on the unit any future stays may be a bit more comfortable.

Like most things to do with HIV and AIDS, it is those with the virus that find ways of dealing with it. Think about any past experiences you have had with hospitals and empower yourself with that knowledge to improve your own comfort.

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10th February 6.00pm
Our Lady of Willesden, Nicoll Road, Willesden, London, NW10
Tel. 0181-965 4935

9th March 6.00pm
Sacred Heart of Jesus, Quex Road, Kilburn, London, NW6 4PS
Tel. 0171-624 1701

13th April 6.30pm
St Thomas of Canterbury, Rylston Road, Fulham, London, SW6 7HW
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14th April
Day Pilgrimage to the Shrine of Our Lady, Walsingham, Norfolk - Please write for further details

Positively Catholic - a monthly support group run by and for people living with HIV/AIDS - 2nd Saturday of each month at St Francis of Assisi, Pottery Lane, London W11 4NQ.
Contact: 0181-248 0005
For details of other CAL events/Newsletter, etc: 0171-485 7298



Fritz Kohle examines the work of The Information Exchange, a place where you can find a world of information at your fingertips.

On December 15, 1995, the staff and users of The Information Exchange celebrated their first anniversary since the Exchange was opened in 1994 by Elton John. The Exchange provides a valuable information service in the field of research and treatment for HIV and AIDS.

Liane and Steve are in charge of the Exchange, ensuring a high quality service for all their users. "We were really busy during the first year," Steve explains to me over a cup of coffee, "but it was incredible during the summer months, especially in July."

The Exchange is used by people living with HIV and AIDS, their carers and health professionals alike. A number of computers with CD-ROM drive, which are connected to the Internet, provide access to a wealth of information to anyone who is interested. Users unfamiliar with computers and the information highway, quickly find their way around the Internet thanks to the help of the friendly staff and volunteers. However, if you are in a hurry, a large selection of journals, newsletter's and other hard copies are on display, providing further access to research and treatment information in the field of HIV and AIDS.

The Internet provides a link to a number of scientific and medical servers around the world. This provides access to specialist data bases, so you can search on a whole host of subjects including HIV and AIDS.

A visit to the Exchange is certainly rewarding. Steve and Liane succeed in providing a relaxed atmosphere, creating a platform for all users to debate and discuss issues relating to HIV. Liane joined the Exchange during the autumn of 1995. "We try to help users any way we can," she says, "bridging the gap between clinical support, research, treatment and charitable organisations." Services provided are confidential and all information is kept up-to-date. The Exchange is a unique and innovative service funded by Crusaid, The Star Foundation and other charitable organisations. The project was opened on World AIDS day in 1994 as an independent charity.

Building on the success of the first year, Liane and Steve are now planning regular monthly seminars in 1996 regarding anti-retrovirals, HIV and children, immunology tests, complementary and conventional treatment and multi drug resistant TB. They are also thinking of developing their presence on the Internet by providing hyper text links with other organisations, providing easy access to even more information on nationwide HIV trials.

Liane also hopes to see more women and children in the exchange. "All are welcome," she says sipping her lukewarm coffee. "We just need to get a better coffee machine - the one we have got, does not make hot coffee."

"All are welcome"

Making contact

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STEROID & CHIPS

David Campbell-Morrison examines the work of dieticians in keeping us healthy and eating whatever we want, while maintaining our muscle mass.

Drugs used to increase weight are becoming more widely talked about in HIV circles. To find out more I talked to Hazel Ross, a dynamic dietician at the Kobler Centre, one of the few clinics in the country actively investigating the use of anabolic steroids and growth hormones to prevent HIV-related weight loss.

Hazel is eager to tell HIV positive people what dieticians can do to help them maintain their health. It has been clear for some time that a decrease in lean body mass, that is muscle, is linked to a decreased survival rate. The opposite, that increasing muscle weight in HIV positive people could improve their chance of survival seems logical but has yet to be proved. Hazel is currently designing several trials to help answer this question.

A major development in the treatment of HIV is the discovery that weight loss can often be reversed. Wasting is no longer an inevitable consequence of HIV / AIDS. But weight loss is often a useful indicator of a new infection or disease occurring and so should be carefully investigated as a first sign that something is wrong. Obviously when infection causes weight loss the priority is to treat the infection. Doctors now realise that a change in weight of half a stone is important and should be acted upon.



People with HIV are increasingly aware of the impact of diet on their health and often demand dietary advice. This is usually provided as a relatively low cost service which provides a great benefit.

Meeting with a dietician involves several steps. The first step is to find the balance between what is eaten and what is expended in terms of energy. The food intake is assessed by using a food diary over a few days which can then be analysed by a computer to determine the amount of energy the food contains. The amount of energy used at rest (base metabolic rate) is measured using a machine which examines the air breathed out whilst a person lies on a bed. Weight loss can occur if the energy contained in the food consumed is less than the energy that is expended. There can be several reasons for this. Thrush can make eating uncomfortable which means that most people will simply eat less food. Cryptosporidium can cause diarrhoea which is worsened by eating fat, so people with this condition tend to cut down on energy-rich food. Loss of appetite due to nausea (from drug treatment, for example) can also lead to people not eating enough.

In the second step of the meeting the dietician will try to find out if any of these are the likely cause of the weight loss and can recommend that the doctor perform tests to determine if this is so. A person who has diarrhoea may be sent a gastro-intestinal doctor to see if the cause of the diarrhoea can be treated. An increased metabolic rate can be a sign of an undiagnosed disease such as PCP or lymphoma which needs to be diagnosed and treated. However the metabolic rate may be slightly raised in otherwise healthy persons with HIV and this is not a cause for alarm. Dieticians may also be involved when an HIV positive person has a very serious illness such as pneumonia where it is possible to lose a great deal of weight quickly. If this weight loss is prevented the chance of survival is increased.

The next step of the assessment is advice. If too little food is being eaten, the reasons for this (painful eating, for example) must be eliminated if possible. Advice may be given to eat smaller meals more frequently and to include different food types and supplementation. Each written diet plan is individual and gives recommendations to achieve the proper intake of food.

Supplements may be offered in several different forms ranging from the drinks in cartons to powdered supplements to increase protein or energy intake. Liquid supplements are often disliked for their taste, so substitutions can be offered (a Kit-Kat is the equivalent of a Fresubin drink). Some people think that giving supplements is all that dieticians can offer which ignores most of what they do. Even clients who already know the cause of their weight loss can rely on dieticians to help with practical tips and long-term support.

Drug therapies are becoming more widely available to help maintain or increase body weight. These are divided into those which increase the appetite and those which have an anabolic effect. Anabolic means growth promoting. Usually before any of these drugs are prescribed a supervised diet plan is tried for six weeks.

Megestrol (also known as Megace) has been used in the past to increase appetite. People using this will put on weight but this tends to be fat rather than muscle, which has no link to survival. The drug will also decrease the male hormone testosterone and decrease the sex drive.

Anabolic steroids are a useful tool in increasing muscle mass when used with a diet plan and weight-lifting (pumping iron). These are available to certain groups of patients after referral to dietician and are either taken as tablets or by weekly injections. Clinical trials to see whether increasing body weight actually improves health are being planned at the Kobler Centre but a lack of funding is hampering these plans.

What does the future hold? I ask Hazel. She replies that the role of Growth Hormones (steroids) has yet to be determined. It is prohibitively expensive (about £50,000 a year) which means that it will not be used on a continuous basis but possibly may be used after infections to help regain health. PEG, a system where a tube is placed directly into the stomach through the abdominal wall so liquid foods can be given continuously is also a technique of the future. This sounds uncomfortable but Hazel says that the best salesmen are those who have had the tube inserted and felt the benefit. This is generally used for about three months and a lot of weight can be gained. PEG works best when there is no longer diarrhoea. However in the above cases it probably needs to be used for longer than three months.

The take-home message? Take your weight seriously and consult a dietician if it changes significantly.

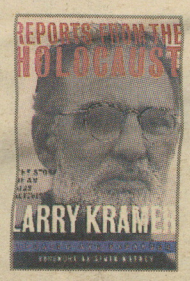
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Growing Up Positive.
Stories From a Generation of Young People Affected by AIDS.
Ian Lucas. Price £9.99. (Order Code C 003.)

These are real life experiences of young people and their families, not case studies of a virus, but success stories on how to live with HIV and AIDS, have fun and be young.
It is of crucial interest to anyone working in the field of HIV/AIDS and those who delight in the value of human experience over statistics.



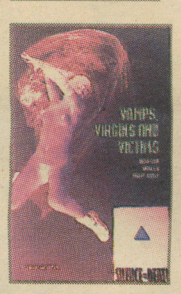
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Larry Kramer. Introduction Price £7.99. (Order Code C 004.)

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State of the Queer Nation.
A critique of Gay and Lesbian Politics in 1990 Britain.
Chris Woods. Price £4.99. (Order Code C 008.)

Chris Woods'' trenchant analysis throws open many taboo issues for 1990s queers and questions whether, in the pursuit of nebulous 'rights', lesbian and gay men have lost touch with the Utopian goals which have bound them together for the past two decades.



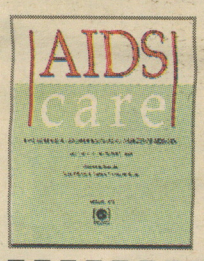
Vamps, Virgins and Victims.
How Can Women Fight AIDS?
Robin Gorna. Price £16.99. (Order Code C 005.)

In this groundbreaking analysis Robin Gorna demonstrates that AIDS is a 'queer' disease which affects 'others' - and women are in the front line as HIV moves beyond core groups. Gorna asks what the critical questions so far unasked or unanswered are: Is there a feminist agenda on AIDS? How can women avoid acquiring HIV? What do women need to fight AIDS?

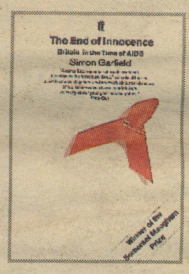


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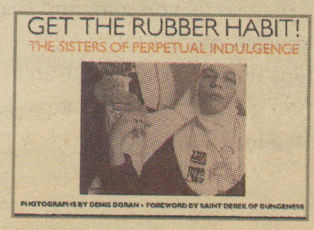
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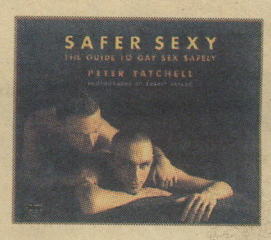
Denholm Elliott. - Quest for Love.
Susan Elliott
Special Offer Price £ 7.99. Hardback. (Order Code H 001.)

Denholm Elliott was an actor for our time. On stage and screen he is best remembered for playing the underdog, battling against pressures beyond his control but always with a core of decency and dignity with which audiences could identify. This book is Susan Elliott's own story of their unusual 30 year marriage and family life in London and Ibiza with their children until his death, brought on by AIDS, in October '92. Positive Nation has secured the last supplies of hardback copies in the UK. We also have a large number that are autographed copies. 1st come - 1st served



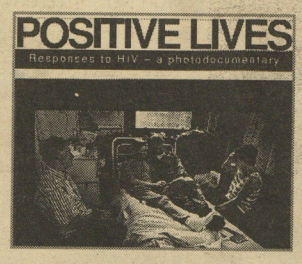
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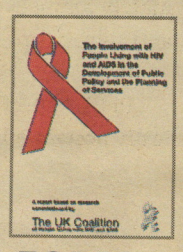
Safer Sexy.
The guide to gay sex safely. Peter Tatchell.
Photographs by Robert Taylor. Price £ 14.99. (Order Code C 006.)

Safer Sexy is a valuable and innovative contribution to the fight against AIDS. The first truly comprehensive guide to safer sex between men. Breaking new grounds in sex education and AIDS awareness, this book recognises that the promotion of gay self-esteem and self-empowerment is a crucial aspect of the fight against HIV.
Warning: This book contains sexually explicit images.



Positive Lives.
Responses to HIV - a photo documentary.
Price £12.99 . (Order Code C 002.)

An extraordinary collaboration.
Patients, photographers, friends and lovers have come together to produce a unique collection of photographs about HIV and AIDS . Subjects as varied as gay life, sex, prisons, children and carers are portrayed with intensity and imagination.



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by Paul Vagg

A BOPPING Good Year!



Since I will be covering all the January new releases in the next edition of Positive Nation, and letting all you people know 'What's Hot' and 'What's Not', I thought that I would start with a nostalgic journey along memory lane to look at the tracks that had 'em dancing in the aisles, and those that had 'em running for the exits in their thousands.

1995 has without a doubt been the year of the re-release, many of which came to us in new remixed versions.

Tracks like Livin' Joys "Dreamer", The Original's "I Luv U Baby", and Blondie's "Union City Blue", stormed the dance floors across the UK, and throughout the next year this trend looks set to continue. New remixes of Newton's "Sky High" and Taylor Dayne's "Tell It To My Heart", along with Donna Giles "And I'm Telling You I'm Not Going" will be assaulting the charts early this year.

1995 saw the 'boy babes' rock the mainstream charts, with bands like Take That and Boyzone firmly establishing themselves at the top of the music biz. Tracks the likes of "[illegible]ck For Good" and "Love Me For A Reason" as well as some very hunky bodies bringing instant fame and success.

They need to watch their rears however as a new batch of lithe gyrating teenage hunks called "Upside Down" will have us all drooling at the mouth (whether their single is a hit or not), when they hit the scenes this month.

The mega stars have had a good year, with the ever popular Madonna, still there after all these years, and it's my personal opinion that "Something To Remember" is her best album to date.

Michael Jackson proved without a doubt that he is still the 'king of pop', when after an unsavoury year that saw him involved in huge scandal, ill health, and reported marriage problems he smashed sales figures with the album "History". This just goes to show that there is no such thing as bad publicity.

For me the artist of the year was Tina Arena, her of "Chains" fame, but 1995 was such a great year for music, that it's perhaps unfair for me to raise her above the rest.

So onward we go into the unknown territory of the next year, and unless like me you find yourself writing for a magazine, you may find that you have more leisure time, so each month I'll be reviewing new releases, the charts, and those tracks that didn't quite make it. I'll be bringing you gossip, readers comps, prizes, and of course me !!
Bye for now, I have to view my classical collection !!!



The music industry has long been threatening to spawn another 'Boy Babe' band. With 'Take That' riding high on the crest of a wave, the time for the birth of a few hunky lads, who can dance a bit, couldn't be better.

Enter '**UPSIDE DOWN**'.

"*Oh No!*, Not Again" I hear the nation cry.

"YES AGAIN", I say, "But this time they can sing" (Total silence-disbelief Ed).

'Upside Down' are a breath of fresh air, after the 'Boyzone' and 'Take That' era.

The four lads, Jamie, Richard ,Giles & Chris aged 17-22, have been in the studio for the last year with pop supremo Ian Levine. Creating an album of, and I quote 'Perfect pop -songs'.

Their debut single '**CHANGE YOUR MIND**' was released on January 8th, and is almost certain to be a smash hit. Led by Giles Kristian, this track is a smooth ballad. Add to that 'Good Looks' and "Great Bodies', these 'Babes' are headed for the top.

"My recommendation!", "Check them out!...."

You can be one of the first people to own this single because we have been given four copies to give away free!, to the first four readers who put their name, address and 'Upside Down Freebie' on a postcard to the 'Give-aways' address!.

Philadelphia (cert.12)

Andrew Beckett (Tom Hanks), a promising young lawyer, finds his career cut short when he's fired from the prestigious law firm he works for. They say hasn't got what it takes. Andrew Beckett knows it's because he's got AIDS.

Determined to defend his dignity and professional reputation, Andrew hires a small-time personal injury lawyer, Joe Miller (Denzel Washington), to sue his former employers for wrongful dismissal. Joe is initially reluctant to take on the case. Although he has grown up knowing the pain of prejudice, he's never had to confront his own prejudices against homosexuality and AIDS....until now.

The two men launch an historic and moving struggle against society's ignorance and intolerance.

One man is fighting for his reputation, his life and ultimately for justice. the other is battling to overcome his own and society's prejudice and fear.

Break out the Kleenex, for this is a real weepy.

PHILADELPHIA is one of the most powerful and critically acclaimed movies of our time, ...an absolute must.

GIVE-AWAY

As an added extra bonus, Positive Nation has three copies of PHILADELPHIA to give away to the first readers who writes in with the correct answer to the following question.

In which space spectacular did Tom Hanks recently star ?

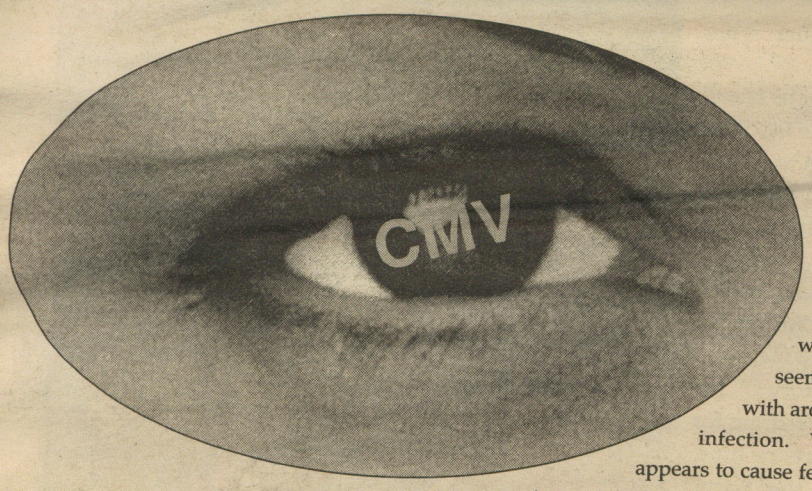
Answers on a postcard please, with your name and address to:
Philadelphia Competition, at the usual give aways address.

How to get your Give-away

Send in your postcard, marking in the top left hand corner which give away or competition you are entering, and send it to:

Give-aways, Positive Nation,
Southbank House, Black Prince Road,
London SE1 7SJ.

BLINDING vision



CMV can cause disease in a number of parts of the body in people living with AIDS. Body Watch looks at the problems this virus causes

Cytomegalovirus (CMV) is a member of the herpes family of viruses. It is relatively common within the general population and also seems to be very common within gay men, with around 95% of gay men showing signs of infection. Within healthy individuals CMV appears to cause few problems other than flu like symptoms on initial infection. In people with compromised immune systems it can cause a range of infections, the most common being CMV retinitis. About 20-25% of people living with AIDS develop CMV retinitis in the later stages of their disease, and an additional 5-10% develop CMV disease in other organs. In rare cases, people with quite high T-cell counts can also experience CMV-related disease.

Symptoms

CMV retinitis is infection in the back of the eye, causing the retina to become swollen and inflamed. This means that signals sent from the eye to the brain become incomplete or inaccurate, leading to blurring of vision and/or blind spots. If left untreated, the retina can become scarred, leaving permanent damage to the eyesight or even no vision at all. A very early sign of CMV retinitis may be the appearance of 'floaters' in the vision, visual hallucination of flashing light, a misting of vision, or blurred or dark areas in the side vision.

Any of these symptoms requires urgent examination by someone experienced in looking at CMV retinitis such as an ophthalmologist (an eye specialist) as it may require special instruments to view the back of your eyes. This is urgent, as it is important to start treatment straight away. The doctor should be looking at the back of the eye every few days during the treatment to make sure that things are improving.

Gastro-intestinal CMV infection can lead to colitis (inflammation of the bowel), cholangitis (inflammation of the bile duct) and ulceration in the mouth, throat or around the rectum. These conditions can result in diarrhoea (often containing blood), fever, abdominal pain and weight loss. CMV in the brain can lead to CMV encephalopathy. CMV can often be found in the lungs of people with advanced AIDS but this only rarely seems to cause problems, usually in combination with PCP. It can also sometimes affect the peripheral nerves, causing pain with numbness and weakness beginning in the legs which then spreads upwards, affecting bowel and urinary function. Polyradiculopathy, also known as Cauda Equina syndrome, has been linked to CMV. This is thought to be caused by CMV infection of the spinal cord, causing symptoms of loss of feeling in the lower limbs, urine retention, and loss of reflexes. This condition is often fatal unless it is treated very promptly indeed. Even after treatment there is a risk of relapse; preliminary research suggests that loss of hearing in one or both ears may be an early warning sign of relapse of polyradiculopathy.

Diagnosis.

CMV disease can be hard to diagnose from symptoms alone, and often requires the virus to be detected in biopsy samples. CMV-infected cells can be identified under the microscope in samples of the colon, oesophagus (throat) or lung tissue. Special strains that react with CMV may be used. Doctors may try to grow (or 'culture') CMV from blood, tissue or urine samples, but this can take several weeks and in any case a positive result does not necessarily establish that CMV is the cause of any specific symptoms. Culture is therefore only usually used to help confirm a diagnosis based on symptoms and examination of biopsy samples. CMV retinitis is usually diagnosed by ophthalmologic examination of the eye. Early lesions appear as small yellow-white patches with a grainy appearance, often with accompanying bleeding. There are blood tests for antibodies to CMV, but these antibodies may be absent in people with severe CMV disease, making them of little diagnostic value.

Treatment

The two approved treatments for CMV retinitis are ganciclovir and foscarnet. Both are produced in a liquid formulation for slow intravenous (IV) infusion, and a capsule version of ganciclovir has also been approved. Researchers are trying to develop an oral form of foscarnet. Intravenous ganciclovir was licensed for the treatment of CMV retinitis in June 1989. It has been shown to be quite effective at stabilising sight. The standard dose is 5 mg/kg intravenously every 12 hours for 10 to 14 days. It also seems to be effective for Gastro-intestinal CMV disease, but CMV encephalopathy appears to respond poorly to ganciclovir. Ganciclovir can affect the bone marrow causing anaemia and a reduction in some types of white cells (especially neutropenia- a shortage of neutrophils). The anaemia can be treated using blood transfusions, or possibly with growth factors such as GM-CSF and G-CSF. The reduced number of neutrophils could lead to bacterial infections, especially if the drug is being administered by means of a central venous line. The bone-marrow suppressing effects of this drug can be increased if AZT is being taken at the same time; the dose of AZT may therefore need to be reduced, or ddI, which does not affect the bone-marrow, used instead.

Maintenance

As these treatments at best prevent CMV from reproducing and infecting new cells but do not eliminate the virus from the body, people who have had an episode of CMV disease which is therapy (secondary prophylaxis) with lower doses of the treatment drugs to prevent a relapse. Until recently this has required daily intravenous treatment, and people have often had to have a permanent catheter inserted into a vein in the chest to make the infusions easier to manage at home. In December 1994 oral ganciclovir was approved for use as maintenance therapy for people whose CMV retinitis has stabilised after intravenous treatment. Trials have shown that the capsules are slightly less effective than the IV drug in preventing relapses, but they do remove the need for a catheter and the accompanying inconvenience and risk of infections.

Prophylaxis

Oral ganciclovir has been shown to reduce the risk of developing a first episode of CMV disease among people with T-cell counts below 50, or people with T-cell counts below 100 who have experienced an AIDS-defining illness. A study reported in early 1995 found that the risk was approximately halved. Initial trials of a liquid oral foscarnet have also taken place. Researchers are particularly interested in this drug, because foscarnet also inhibits HIV replication, but is too toxic in its intravenous form to be used as a long-term anti-HIV treatment. Placebo-controlled trials using intravenous acyclovir appear to have demonstrated that the drug can reduce the likelihood of reactivation of CMV disease in bone-marrow or kidney transplant recipients; however, it seems not to be possible to get high enough doses into the body using the tablet version.

This page is supported by PETER MOORES FOUNDATION

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BEDFORDSHIRE BODY POSITIVE,
24 Cardiff Road, Luton, LU1 1PP,
01582 485448 Office,
01582 484499 Advice Line
Mon, Tue, Thu 9.30 - 2.30
Wed...10 - 2.30, 7.30 - 9.30 Fri 10 - 12.30

BIRMINGHAM BODY POSITIVE,
47 George Street, Hockley,
Birmingham, B3 1QA,
0121 212 3840 Administration,
011 212 3636 Helpline
Wed 8pm - 10pm

BODY POSITIVE,
51b Philbeach Gardens, Earls Court,
London, SW5 9EB,
0171 835 1045 Office,
0171 373 9124 Helpline.
Mon - Fri 7pm - 10pm
Sat & Sun 4pm - 10pm

BODY POSITIVE BOURNEMOUTH,
PO Box 359, Bournemouth, BH2 5TL,
01202 297386 Office,
01202 297386 Helpline
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Drop-in Centre, First Floor,
56 Commercial Road,Bournemouth.

BODY POSITIVE LOTHIAN,
37-39 Montrose Terrace, Edinburgh, EH7
5JD, 0131 652 0754

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0191 232 2855 Helpline.Mon - Fri 10 - 6

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0141 332 5010 Helpline. Mon - Fri 10 - 4

BROMLEY POSITIVE SUPPORT GROUP,
c/o Beckenham Hospital,
Department of GU Medicine,
379 Croydon Road, Bromley, BR3 3QL,
0181 289 6623.

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01222 343030 (plus minicom)

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Cymdeithas Corff Positif Sir Gaer A Gogledd Cymru,
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01244 400415,

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4 Rose Hill Chesterfield, S40 1LW,
01246 550550 Helpline. Thu 7pm - 9pm

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01332 292129.

DURHAM COUNTY BODY POSITIVE,
Wilton House,
Milburngate Bridge Durham,
0191 383 1625,

GRAMPIAN BODY POSITIVE,
PO Box 83, Aberdeen, AB9 1AA,
01224 404408 Office,
01224 404408 Helpline. Every Day 24 hours

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26a High Street Hitchin, SG5 1AT,
01462 454744 Office,
01462 454744 Helpline. Mon - Fri
7pm - 9pm

MERSEYSIDE BODY POSITIVE (MBP),
PO Box 180, Liverpool, L69 7BZ,
0151 707 0606 Administration

MID SUSSEX BODY POSITIVE,
The Diva Centre, 94 Three Bridges Road
Crawley, RH10 1LR,
01293 552111

MILTON KEYNES BODY POSITIVE,
c/o Department of Genito-Urinary Medicine,
Milton Keynes Hospital,
Luing Cowley Outpatient Building, Milton
Keynes, MK6 5LD,
01908 690500.

NATIONAL NETWORK OF BODY POSITIVE AND OTHER SELF HELPGROUPS,
24 Cardiff Road, Luton, LU1 1PP,
01582 484887

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01482 581101 Office,
01482 581101 Helpline.
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NORTH MIDLANDS BODY POSITIVE,
PO Box 404, Stoke-on-Trent, ST1 5BX.
01782 201251

NORTH WEST BODY POSITIVE,
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Manchester, M1 2EP,
0161 236 9669 Office,
0161 237 9717 Helpline (with minicom).
Tue & Thu 7pm - 10pm

NORTH YORKSHIRE BODY POSITIVE,
PO Box 47, Selby, YO8 0GJ.
01757 210023 Office,
01757 210023 Helpline. Weds &
Sun 7pm - 12pm

NORTHERN IRELAND BODY POSITIVE,
308 Bryson House, Bedford Street,
Belfast, BT2 7FE,
01232 235515 Office,
01232 235515 Helpline.Tue, Wed,
Thu, Fri2 - 4

OXFORDSHIRE BODY POSITIVE,
Ebor House, 5 Blue Boar Street,
Oxford, OX1 4EZ. 01865 243389

OXAIDS. POSITIVE YOUTH,
c/o Body Positive 51b Philbeach Gardens,
London, SW5 9EB, 0171 373 7547
Administration, 0171 373 9124
Helpline..Mon - Fri...7pm - 10pm..Sat &
Sun...4pm - 10pm

POSITIVELY WOMEN,
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0171-713 0444 Office, 0171 713 0222
Helpline..Mon - Fri...12 - 2

SCUNTHORPE BODY POSITIVE,
22 Laneham Street, Scunthorpe,
DN15 6PB, 01724 289440

SHROPSHIRE BODY POSITIVE,
PO Box 241, Shrewsbury, SY1 4UA
01743 350075 Administration,
01743 350075 Helpline..Mon...10 - 4

SOUTH YORKSHIRE BODY POSITIVE
GROUP, 1 Fitzwilliam Street, Sheffield,
S1 4JL. 0114 275 5500 Office

SWISH,
South Wales Immune Deficiency Self Help,
PO Box 507, Pontardawe,
Swansea, SA6 5YA.
01792 772007 Administration,
01792 772007 Helpline..Wed...2 - 5

THE BIRCHGROVE GROUP,
100 Whitchurch Road,
Whitchurch Cardiff, CF4 3YL,
0345 697231
Administration, 0345 697231
Helpline Mon - Fri...10 - 2

THE UK COALITION OF PEOPLE LIVING WITH HIV & AIDS LTD,
Southbank House
Black Prince Road, London, SE1 7SJ,
0171 582 2425.

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241-243 Southwick Road, Southwick,
Sunderland, SR5 2AB. 0191 549 2228.

WEST SURREY BODY POSITIVE,
PO Box 15, Godalming, GU7 3HN,
01483 418657 Office,
01483 418657 Helpline..Wed &
Thu 8pm- 10pm

THE BASELINE - NUMBERS YOU NEED, TO TAKE CONTROL

National AIDS Helpline	Benefit Enquiry Line	The Terrance Higgins Trust	Lesbian & Gay Switchboard
0800-567 123	0800-882 200	0171-242 1010	0171-837 7324
24-hour helpline offering advice on HIV and AIDS	For those with disabilities Mon-Fri 9.00am - 4.30pm Advice on DLA	Helpline open every day 12 - 10pm. Advice on HIV and AIDS.	24 hour helpline for the gay community offering advice on HIV & Sexuality

CUT IT OUT!

Please fill out the form below to ensure your group is included in our national listings.
Post it to us at:
Positive Nation, Southbank House, Black Prince Road, London SE1 7SJ

or fax us on: 0171-587 5127

Organisation:.....
Address:.....
.....
.....
Postcode:.....
.....
Contact ☎:.....
Contact Name:.....
.....
Description:.....
.....
.....

- ❑ Self-help
- ❑ Drop-in
- ❑ Helpline
- ❑ Needle Ex.
- ❑ Advice
- ❑ Food
- ❑ Hardship Fund
- ❑ Befriending
- ❑ Counselling
- ❑ Other
- ❑ Therapies
- ❑ Clinic Services
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TEL: 0181 888 2782 HIV LINE 0181 365 8285

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- Crèche Facilities
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If you want to talk to someone in complete confidence you can contact BHAF on
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The organisation exists to work with people from the African, Caribbean, Asian, Chinese and Vietnamese Communities
BHAF - MANCHESTER
Registered Charity No. 1005689

positive nation
To advertise call Mark or Shir on 0171-582 9176

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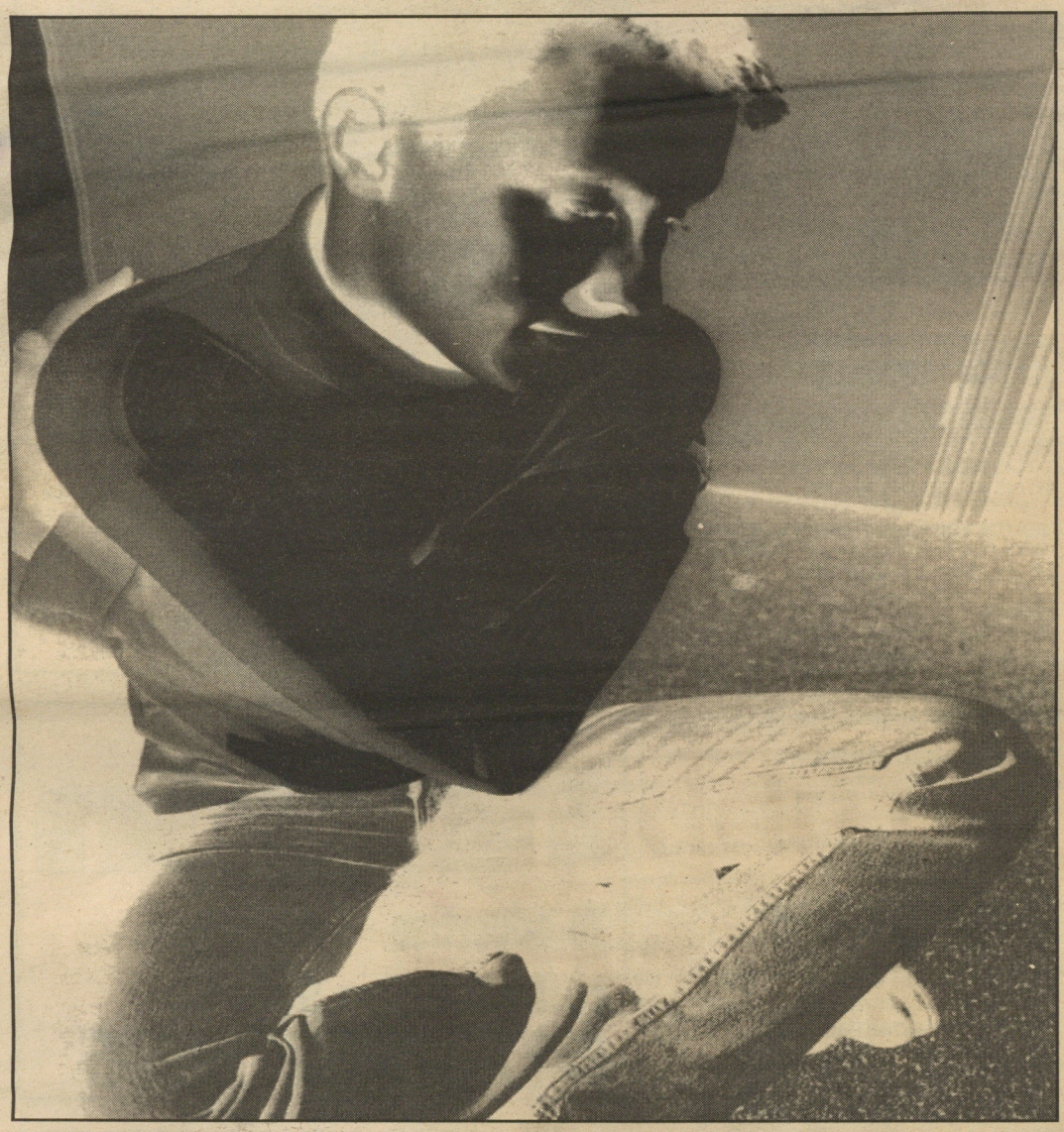
• for issues around HIV/AIDS
• for face-to-face counselling
• for financial support for people with an AIDS diagnosis
• for education/prevention programmes

CONTACT
The Director,
0181-200 0369
during office hours Registered Charity No. 327936

HOT HEALTHY OPTIONS TEAM
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Tel: 0181-983 4888
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and this is what happens from Day to Day

Andria takes a break from the history to remember the life of a Scottish drug-user.



Two Saturdays ago I was having a short breather from the computer, and enjoying some junk TV when the phone rang. It was Ann, my new friend, a Scottish woman who has lived up in Merseyside; she is close to Maeve who lives in Cheshire, a wonderful strong drugs activist from Glasgow who moved down to Widnes, to get a Heroin (Diamorphine) prescription from a doctor; she felt this is what she needed to stabilise her and her partners life. It did stabilise their lives; they got themselves a good home and work and like many settled down to look after each other and their young child.

As you will know, the Merseyside "experiment" was stopped and people's scripts were reduced rapidly, taken off them altogether, or never got them in the first place. Maeve, (who was one of those they wanted to reduce too rapidly,) fought hard through the law courts to retain her script, and won that battle. At least for a while.

Mark decided not to go down that path...His health got very bad as a result of the fact that he couldn't manage the too-rapid detox, **which he had no choice over.** His drug-use thus became chaotic, which meant his health deteriorated rapidly, but since his energies were focused on getting enough drugs to stave off "withdrawal", it was almost impossible for him to prioritise other health matters. Mark had fallen very ill and was that very evening on a life-support machine in the intensive care unit.

Anne had phoned to ask me to ring Maeve, who was in a terrible state sitting with her ailing partner of 13 years. When she finally got back to me, she was desperate, sobbing her sweet little heart out to me. I asked her exactly what was going on and she said,

"He's gone, basically. it's just a matter of time now before they turn the machines off".

Maeve told me the following nightmarish details to me: they had gone to the DDU and Mark had complained of feeling very ill. They looked him over very quickly, and laughed saying there was nothing wrong with him. They then went to his GP who was more responsible, acknowledged that something was indeed wrong and referred him to the hospital for the very next day. The hospital also looked him over and said there was nothing wrong with him. He then collapsed on the doorstep of the hospital and never regained consciousness. He was then dealt with - too damned late!

The autopsy showed that he died from Septicaemia; that he'd also had undiagnosed HIV disease.

What can we surmise about this?

1) Mark was not sick enough to show up even a temperature **-almost impossible** in the circumstances?

2) They (in their great wisdom), decided Mark was "acting out", that he was **just** stoned and not in need of medical attention? Very probable - it's happened to most drug-users at one time or another.

3) They felt he might be suffering from HIV-related illness(es) **but** did nothing to help him deal with this.

4) DDU's don't normally do thorough medical examinations? Why the hell not in certain circumstances when working with such a physically -challenged group of patients?

5) Mark didn't tell them the whole story of how he was feeling? This is definitely not the case; they just weren't into listening or caring that day...

6) They didn't care enough to give him a proper going over? Most likely..

7) They didn't respect that he knew what he was talking about, after all he was only a junky? Probably!

8) Neither were they interested in the opinion of his wife, after all she too was only a junky? Probably.

9) They didn't give him a chance to explain at Casualty either? ***And if not, why the hell not?***

And so another drug-user dies from lack of medical care and negligence. This is unacceptable, heart-breaking and horrific. And right now it feels unforgivable.

I know this happens a lot these days, to, all sorts of client groups, but it's still exceptionally sad when you know the circumstances of their lives. They moved their whole lives out of Glasgow with the hope that the drug-services in the area could give them what they needed to live reasonable lives. He had work, and she spent all the hours God sent working on highlighting the issues which detrimentally affected the lives of drug-users. They had a child that was well loved, and with the new-found stability the scripts had given them, their lives were taken off the street, and the madness of the illicit drug scene. They had a chance, and then this happens...

Trying to save myself from what I call "death of the spirit" (which I suspect is a lot worse than death itself),I have found myself reading Larry Kramer voraciously - especially "Reports from the Holocaust". Like HIV, drug -dependency has been seen to be something we have brought upon ourselves and therefore we do not deserve compassion. But it has been our holocaust for a very, very long time It is my prayer that more of us can rise above the long-term depression that has affected this community for so long and speak out with the same anger that he writes with.

With Love and Solidarity.

Dedicated to Mark C who died from "addictophobia" (also known as lack of medical/professional care)

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Support

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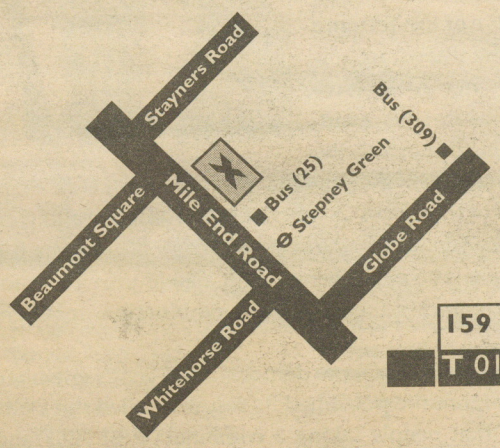
serving people with HIV & AIDS

The Globe Centre, with its dedicated team of volunteers and staff, provides an extensive range of services for people affected by HIV and AIDS. These include GP sessions and support groups, advice on welfare rights benefits, alternative / complementary therapies and legal matters.

The Globe also offers a 5-day a week Drop-in centre with Café and lounge facilities - with the opportunity to relax and get to know the Staff and Volunteer team.

We realise that sometimes you may have problems that you need help to sort out - we are here to provide whatever help you might need - we want you to think of the Globe as a place that will always put you first.

For more information on services please contact the
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We are served by excellent bus routes *(25 and 309)*. There is parking at the rear of the building *(access via Stayners Road)*. Stepney Green Tube station, on the District Line, is a 2 minute walk away.

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T 0171-791 2855 **F** 0171-780 9551

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'A high quality, authoritative journal by and for people living with HIV and AIDS.'
The London lighthouse

To order your copy of February's issue, send payment of £4.50 (includes p&p) to BM EQUILIBRIUM, London WC1N 3XX

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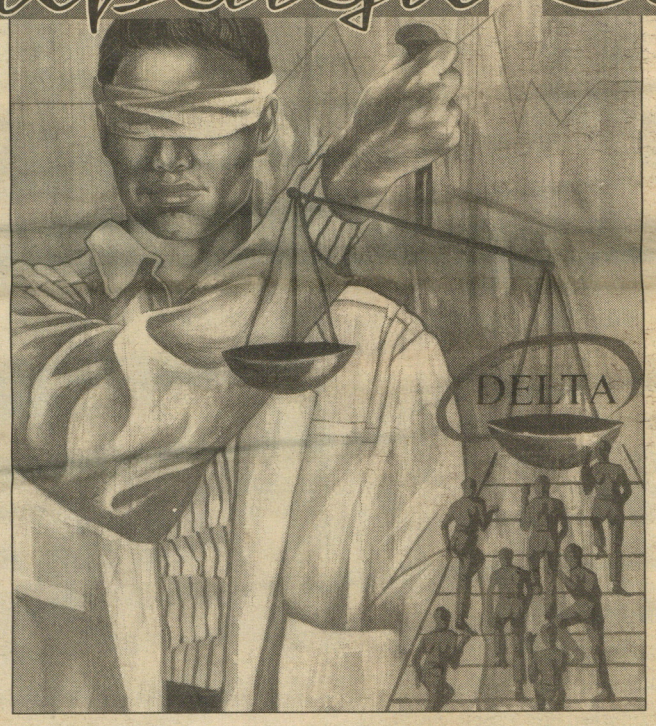
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DELTA

The Campaign Continues



The campaign to persuade the Dept of health to fund the costs of combination treatment for positive men and women received a boost last month when some key voluntary sector HIV agencies in London threw their weight behind it.

Speaking on the eve of World AIDS Day, Nick Partridge, Chief Executive of the Terrence Higgins Trust said, "It is of the utmost importance that people with HIV and AIDS have access to the most effective treatments available. That is why the Trust is supporting the Positive Nation Delta Campaign to get combination treatment funded."

The campaign was started at the end of October with the aim of: calling on the government to not only provide funding to cover the costs of combination treatment for all positive people who could benefit, but also to provide guidance to all Health authorities requiring them to make combination reatment available immediately.

The benefits of combination treatment were demonstrated last September, when a three year research programme published its results. Called the Delta trial, this essentially showed that people taking a combination of AZT and either ddI or ddC had a 40 per cent chance of living longer, and of delaying the onset of illness, than people taking AZT alone.

Launching the campaign, Positive Nation drew attention to the moral and ethical implications for the government if it were to withhold funding for this life extending treatment.

The campaign was followed by a separate study published last month which showed the costs of funding combination treatment, and the implications for existing services if new money was not forthcoming.

The study, commissioned by Positive Nation, showed that if AZT and ddI/ddC were to be made available for all positive people likely to benefit, the cost would be about £12 million per year. This used the government's own figures for the numbers of people with HIV and with AIDS.

The study also showed the scale of service cuts which would be needed if new money was not forthcoming. The brunt of any cuts would be likely to borne by London based HIV/AIDS services, as this is where the largest numbers of positive people live.

Drawing on published annual reports, the study showed that the £12 million required to fund combination treatment is the equivalent of the cost of many of the specialist inpatient services in London hospitals, or of the costs of most of the london based voluntary sector non residential provision, including services such as Landmark, Terrence Higgins Trust, and Positively Women.

The figures show that the scale of reductions would be much greater than anything which HIV/AIDS services have faced since starting to be established in the mid 1980's.

This financial problem is likely to be compounded by a separate £15 million cut in HIV/AIDS funding announced at the beginning of December. Again, most of this is likely to be borne by London based HIV/AIDS services. Taken together, these two sets of financial pressures amount to £25 million - equivalent to 15 per cent of all national HIV/AIDS expenditure.

Stephen Dorrell MP
Secretary of State for Health
Dept of Health
79 Whitehall
London, SW1

Dear Mr Dorrell,

I am writing to request that you make funding available to pay for the costs of providing combination therapy for all people with HIV/AIDS who would be able to benefit.

As you may know, a recent two year research programme, the Delta trial, has shown that there is a reduction in mortality of nearly 40 per cent amongst HIV positive people taking combination therapy, i.e. AZT & ddI or AZT & ddC, over those taking AZT alone.

The results are so significant, that it is important that all people with HIV or AIDS who could benefit from these drug treatments have the rights to do so. This will only be achieved if funding is made available to pay the costs of the drugs.

I would be grateful for your reply,

Yours sincerely,

FUNDING COMBINATION TREATMENT - WHAT DOES £12 MILLION BUY?

The costs of paying for combination treatment - £12 million - is the equivalent of any of the following :

- Most of the specialist hospital in patient services in london, including wards at the Chelsea & Westminster, St Mary's, UCH/Middlesex, Royal Free, Royal London, Kings College, and Guys/St Thomas hospitals.
- The combined total costs of at least three major london treatment centres.
- Most of the day care/drop in provision across london in both the statutory and voluntary sectors.
- All non residential voluntary and charitable provision in London, including the Landmark, Terrence Higgins Trust, Positively Women, and Body Positive.
- All hospice and residential provision in the south east of England, including Lighthouse and Mildmay.
- All the specialist mental health provision for people with HIV/AIDS across the South east, including community based teams, and voluntary sector services such as Patrick House.

HOW YOU CAN GET INVOLVED IN THE DELTA CAMPAIGN

Individual Readers

Write to the Secretary of State for Health. A sample letter, to cut out and send is included in this edition.

HIV/AIDS Services

Write to the Editor, Positive Nation indicating that your organisation supports the campaign. In addition, write to the Secretary of State for Health. In future editions we will publish the names of those organisations pledging their support to the campaign.

SMALL ADS

◆ **London** Guy, 27, HIV+, Wicked mind, smooth, slim, wants positive friend for fun, joyous 1-2-1. No deathwish queens please, try this ad it won't be your loss. Box N1201.

◆ **West London**, Fun loving, healthy and positive. Good looking, intelligent 35, Hoping for friendship, good times and maybe romance. Can you help? ALA. Box N1202.

◆ **Guy 40** Tashe, cropped hair, likes tight fitting shorts and raunchy underwear, would love to meet guys with similar tastes. Photo and phone ALA. Box N1203.

◆ **Attractive** outgoing, white female, 31, looking for similar type of guy. Must have G.S.O.H. and live in London. Interested in music, film and good social life. Photo please. Box N1204.

◆ **Liverpool** 42, HIV+ seeks friendship and love, liking most things, uninhibited sharing together, lets see first how we do , ALA. Photo appreciated. Possible 1-2-1 write soon, also looking for work. Box N1205.

◆ **Asian 35** West London Appt. Considerate solvent, caring into travel, dinning, music, movies seeks sincere caring friends/ companions 30+ for friendship, socialising, dinning, visits and more. Please write, photo and phone. Box N1206.

◆ **London HIV+**, 35 Attractive swimmer, 6'1" Happy, open-minded Spaniard enjoying holistic way of life, seeks versatile guy 25-45 for friendship and possible 1-2-1. Box N1207.

◆ **Scotland 35** HIV+ over 10yrs, remain healthy. Recovering addict in Prison. Seeks female penpal anyage, looks unimportant. I enjoy music, travelling, good company, laughter, keeping fit. Please write and lets share good and bad times! Box N1208.

◆ **HIV+ Gay** prisoner, 29 surrey, Parole Feb 96, good looking, seeks pen pals for help during sentence. Poss 1-2-1, 6'3", Black cropped hair, clean shaven, medium build, genuine 1st Ad. ALAWP. Box N1209.

◆ **Northwest/Manchester**, 44, 5'9", Slim, No1 crop, hirsute body, mainly passive, WLTM taller slim active guy 25-38, romantic but masculine for occasional scene nights in/out. Usual varied interests, own home, car, smoker or otherwise drug free for close tactile friendship/companionship, hopefully 1-2-1. Prefer Clone/Skin type. Serious commitment sought/offered to right guy,. Cancer/ Scorpio/ Capricorn's compatible with this taurean. ALAWP. Box N1210.

◆ **Gay Guy** 37, HIV◆ 7 yrs, K.S. West London, [illegible]s uninhibited guy for special 1-2-1. Enjoys Clubs, Parties, Smoker. Lets have some fun at Christmas. Box N1211

◆ **Sometimes,** I just sit and look under pines on Parliament Hill. I suppose a snog's out of the questions then? Horny, Healthy, WE. White Designer (43) Angel Box N1212.

◆ **32 HIV+** Male, slim, clean shaven, affectionate and fun loving, non-scene looking for some fun and friendship with similar like minded guy in and around London area. Photo Appreciated. Box N1212.

◆ **Sussex / Anywhere.** 34, Muscular fit, Healthy, and Horny. Seeks mates for active daytime fun! You've tried the rest, now, try the best! ALAWP. Box N1213.

◆ **North London**/ Anywhere. Cropped Tashed Hairy Tattooed. 42 Medium build, totally uninhibited and versatile, looking for guys who are into most colours and always horny. Any age, can accommodate. ALA. Box N1214.

◆ **London. HIV + 32.** Good Catch ! Seeks ; Butch , Smart , Witty "Bloke". You get Love & Affection , I get a great reason to stay indoors! Hairy ? Lets Talk ! Box P001.

◆ **West London / Spaniard**. Handsome, Healthy, Positive ,open-minded , swimmer. Intelligent 35, 6'1'. Enjoys Holistic way of Life, seeks Versatile Guy for friendship good times and possible 1-2-1.Can you reply? A.L.A. Box P002.

◆ **N.London/Anywhere.** Good looking 40 ,Cropped ,Tashed , Smoker , Medium Build. Fit ,Versatile Seeks Guys for Raunchy Encounters & maybe lots more!! Looks , Age unimportant. 100% Genuim is. Photo? Phone? A.L.A. Box P003.

◆ **London Guy 29**.HIV + 6ft 1'.Quiet , Lonely, needs Friends. Hungry for Lots of Fun ! Open to Learning New Tricks! Life needs to be Enjoyed. A.L.A.You won't be Disapointed. Box P004.

◆ **Male to Female Transsexual.** HIV- Seeks Straight Acting, Non scene Male for Friendship,TLC, Laughs.South West England. GSOH Essenital. Prefer Non Smoker 25-37 years.Box P005.

◆ **Fit, Healthy Bloke**.37 , HIV + 9 years.Seeks Together Mate/Lover for Committed One to One. Prefer Builder or Sporty Types. Footballer / Boxer . I'm Fun , Honest , Horney , Passive. Enjoy Gay Scene or Quiet Nights in.But Missing Cuddles and Kisses;Have plenty of Love for Right Man. ALAWP. London / South Only. Box P006.

◆ **HIV+ Black Female** Seeks Pen Pals for Frienship to share Good and Bad Times.I am 31 .Gay , Lesbian , Bi , Hetero, Male or Female any Age.ALA Seeks Friendship Not Romance. Box P007.

◆ **Student Nurse** Undertaking Study into opinions of People with HIV on Service Provided for them within London Area. Can anyone help me ? Confidential.Box P008.

◆ **HIV + Student** seeks Financial Support to Complete Postgraduate Studies for MA. Box P009.

◆ **Manchester Student.** Young 32. Healthy fun-Loving, GSOH. Nice Looking. Into Music: Techno, Bjork, Portishead , Almond , Walker , Anything !" Status not the End of my World." Seeks Geogeous similar Guy. 1-2-1? Box P010.

◆ **West Midlands**. Attractive Female 30's. HIV + , Healthy seeks Sensitive Male Friend to put fun back into Life.Box P011.

◆ **Edinburgh. 33 HIV +** .Slim , Fair ,Blue eyes.GSOH. Looking for Fun and Frienship.Poss 1-2-1.Go on Boys Take a Chance! Photo Apprec, not Essiential.ALA.Box P012.

◆ **North Devon. 31 HIV+** 6'1" Blonde, Slim.Looking for Fun and Freindship.Can Travel and Accomadate,Photo gets mine.Guys upto 45.' Lets have Fun in the Country!' ALA. Box P013.

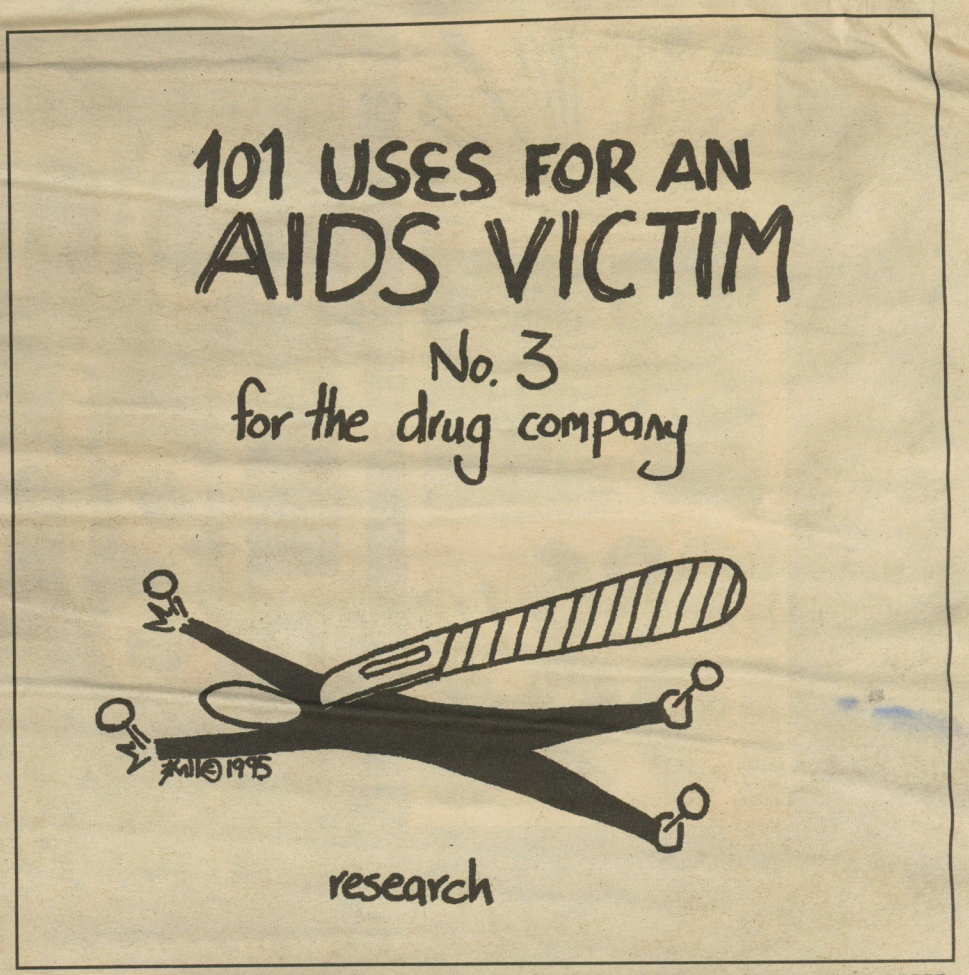
TO REPLY TO AN ADVERT

1) Place your reply in a plain envelope with the relevant box number clearly written in pen, in the top right hand corner.

2) Place that , togeather with a loose first or second class stamp (one for each reply) into a larger envelope and mail it to us at:

Box Replies,
Positive Nation,
Southbank House,
Black Prince Road,
London SE1 7SJ.

Replies will be forwarded only if a stamp is included.
Circulars will not be forwarded if they are discovered, so don't try to send them.



SMALL ADS COUPON

To place a personal ad in Positive Nation.

1. Complete the coupon in BLOCK CAPITALS. One word per box.

2. If you require a box number for a personal advert the facility is FREE for the next issue. If you require a box number for any other classification the charge is £3 per month. If you would like your advert to be semi-display (**BOLD TEXT** with a line above and below) the charge is an additional £4 per month.

3. The first 30 words in personal ads are FREE, additional words are 50p per month. All personal ads must have a box number - this is FREE for the next issue. A charge of £3 per month will be introduced after that.

4. Cheques and Postal Orders should be made payable to Positive Nation.

5. All advertisements should arrive at our offices by the third Monday of the month.

Names and addresses are treated in the strictest confidence.

Please publish my ad for_____ months.

❑ I would like a Box Number (all personal ads must have a box number)

❑ Semi-display £4 per month

❑ I enclose a cheque made payable to: Positive Nation

Please charge my :

❑ Visa ❑ Access/Mastercard ❑ Delta ❑ Switch (Issue no___)

Card No. ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry Date: ☐☐☐☐

Signature:.....

Today's Date:.....

Name:.....

Address:.....

.....

.....Postcode:.....

Complete this coupon and return to:
POSITIVE NATION
Southbank House, Black Prince Road, London, SE1 7SJ



London Lighthouse

Tenth Anniversary

Remembering the past
Focusing on the future

Some highlights of our Tenth Anniversary Programme will be:

- The launch of a **major capital appeal** to further improve existing services and develop new ones

- A major lecture series "**AIDS, Science and Society**" in conjunction with the New Statesman and Society

- A sparkling series of events featuring the likes of **Eddie Izzard, Steve Coogan, Rory Bremner, Lesley Joseph and Jo Brand**

- The publication of **On Watch: Views From The Lighthouse**, a new book by Lighthouse Director, Christopher Spence

- A party to celebrate **Pride '96**

For more details about these and our other exciting events call 0171-792 1200

London Lighthouse, 111-117 Lancaster Road, London W11 1QT. Telephone 0171-792 1200. Fax: 0171-229 1258.
Registered charity no 295171.