

opinion:

"HOW TO HALT THE US AIDS EPIDEMIC –
A NURSE'S SECRET WEAPON - TELL PEOPLE THE TRUTH!

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I. THE PROBLEM

When trying to lessen risk for catastrophic illness from, say heart attack, stroke or lung cancer, we in health care routinely caution our patients to reduce or avoid the known risk factors that predispose to the diseases in question, say reducing high fat diet, reducing high blood cholesterol or stop smoking.

Yet, when it comes to AIDS, the first "politically correct" disease in US history, many government, educational and private special interest sources shun telling people the truth about how to avoid HIV infection - by avoiding the known reported risk factor behaviours.

II. AIDS STATS FROM THE CDC

Consider the US Centre for Disease Control's "Table 5, US AIDS Exposure Category Table." To the end of 2000, America has suffered 774,467 cases of AIDS, of which 765,559 are adult/adolescent and 8,908 are pediatric (age under 13 years).¹

Let us examine the government designated categories, which I will assign abbreviations for convenience. The US CDC identifies "exposure category" behaviors for adult/adolescents and for pediatrics (under age 13).

Consider the adult/adolescent exposure categories: men who have sex with men (MSM); injecting drug use (IVDU); men who have sex with men and do injecting drug use (MSM & IVDU); hemophilia/coagulation disorder (HCD); heterosexual contact (HC); recipient of blood transfusion, blood components, or tissues (BTBCT); other/risk not reported or identified (OTHER/UNKNOWN).²

For both sexes totals of US AIDS adult/adolescent cases, 46% are MSM; 25% are IVDU; 6% are MSM & IVDU; 1% are HCD; 11% are HC; 1% are BTBCT; 9% are OTHER/UNKNOWN.³

For male sex totals of US AIDS adult/adolescent cases, 56% are MSM; 22% are IVDU; 8% are MSM & IVDU; 1% are HCD; 5% are HC; 1% are BTBCT; 8% are OTHER/UNKNOWN.⁴

¹ 1, US Centre for Disease Control, "Table 5, US AIDS Exposure Category Table." Report of known cases of AIDS in the USA to the end of 2000.
<http://www.cdc.gov/hiv/stats/hasr1202/table5.htm>.

² 1, US CDC, "Table 5 US AIDS Exposure Category Table." The US CDC compiles statistics for HIV and AIDS by "exposure categories," the known and identified risk behaviours that are known to be modes of transmission for HIV infection: MEM = men who have sex with men; IVDU = injecting drug use; MSM & IVDU = men who have sex with men and do injecting drug use; HCD = hemophilia/coagulation disorder; HC = heterosexual contact; BTBCT = recipient of blood transfusion, blood components, or tissues; OTHER/UNKNOWN = the presumed mode of transmission for HIV infection is either not reported or identified for that case.

³ 1, Ibid., US CDC, "Table 5 US AIDS Exposure Category Table."

⁴ 1, Ibid., US CDC, "Table 5 US AIDS Exposure Category Table."

Thus, of both sexes total US AIDS cases for adult/adolescents, 88% are cases that could have been avoided by avoiding the exposure category at risk behaviours: 46% MSM + 25% IVDU + 6% MSM & IVDU + 11% HC!⁵

Further, for male sex total US AIDS cases for adult/adolescents, 91% are cases that could have been avoided by avoiding the exposure category at risk behaviours: 56% MSM + 22% IVDU + 8% MSM & IVDU + 5% HC!⁶

III. THE PRESCRIPTION

I contend that we in the medical and nursing professions are morally, ethically and professionally obliged to tell people the truth about the risk factor behaviours that will predispose one to HIV and thus the horrors of AIDS. We must alert the American public that they are not receiving correct scientific information on how to avoid HIV!

People must be cautioned to avoid homosexual intercourse, sexual promiscuity, intravenous street drug use and the "free love" of adultery.

People must be encouraged in abstinence until marriage; marriage between one man and one woman - hopefully for life; not destroying their bodies with intravenous street drugs; be bonded to their marital spouse within a mutually faithful, loving and uninfected relationship.

IV. CONDOM FAILURE

Another matter the US CDC AIDS stats reveal is that we may not be quite as sure as to the modes of transmission of HIV as the public is lead to believe. Consider: For both sexes total US AIDS cases for adults/adolescents, 9% of AIDS cases are OTHER/UNKNOWN. For male US AIDS adults/adolescent cases, 8% are OTHER/UNKNOWN.⁷

This raises the issue of the effectiveness of male latex condoms in preventing HIV transmission. Consider the article "Doctors Say CDC Concealed Truth About Condoms For Years" by Bill Fancher and Jim Brown, published in Agape Press News on 7/25/2001 AD.⁸ As Fancher and Brown observe, "Representatives of the 10,000-member Physicians Consortium say the CDC has known for years that...condoms are 85% effective in helping prevent the spread of HIV..." if used 100% perfectly 100% of the

⁵ 1, US CDC, "Table 5 US AIDS Exposure Category Table." The US CDC compiles statistics for HIV and AIDS by "exposure categories," the known and identified risk behaviours that are known to be modes of transmission for HIV infection: MEM = men who have sex with men; IVDU = injecting drug use; MSM & IVDU = men who have sex with men and do injecting drug use; HCD = hemophilia/coagulation disorder; HC = heterosexual contact; BTBCT = recipient of blood transfusion, blood components, or tissues; OTHER/UNKNOWN = the presumed mode of transmission for HIV infection is either not reported or identified for that case.

⁶ 1, Ibid., US CDC, "Table 5 US AIDS Exposure Category Table."

⁷ 1, Ibid., US CDC, "Table 5 US AIDS Exposure Category Table."

⁸ 2, Fancher and Brown, "Doctors Say CDC Concealed Truth About Condoms For Years." Agape Press News, 7/25/2001 AD. <http://www.headlines.agapepress.org/archive/7/252001b.asp>.

time.⁹

Many authorities, rather than educate people on the known exposure category risk behaviours for HIV, simply advise sexually active people to practice "safe sex" by using male latex condoms. Yet, it is well known that condoms can be defective, slip off, spill, degrade with heat and have microscopic holes within their latex barriers far larger than the HIV organism.¹⁰

This is not the first time in human history that money and politics have been placed over the health, safety, welfare and very lives of the public. If we are to stop the tragic suffering of AIDS in the USA, we in the medical and nursing professions are bound by our sacred duty to honestly counsel people with the truth, and to alert the American public of these facts.

V. THOU SHALT NOT BEAR FALSE WITNESS

GOD commands men in The Law of Moses in EXODUS 20:16: LO' TA" ANEH BER"ACHA "ED SHAQUER! - ¹¹ לֹא־תִעֲנֶה עֵד בְּרֵעֶךָ שָׂקֵר - literally, "Not you now and always will answer at your fellow [as] a witness [of] falsehood!" Or in The King James Version, "Thou shalt not bear false witness against thy neighbour!"¹²

The Lord JESUS CHRIST repeats this command in The Gospels, as in MATTHEW 19:18, "...Thou shalt not bear false witness!"¹³ Saint Paul repeats This Commandment within ROMANS 13:9, "...Thou shalt not bear false witness..."¹⁴

Whenever we speak falsehoods, either by outright lying or by withholding known vital information, we are violating The Almighty's Commandment, that we should not bear false witness!

VI. NEGLIGENCE

When we extend The Divinely ordained Command to not bear false witness against our fellow man into public service - such as public health, medicine and nursing - we derive professional standards, the violation of which - when resulting in harm to others - may be termed "negligence." The Webster's Dictionary defines "negligence" as behaviour which is "characterized by neglect... indifference or careless[ness]."¹⁵ To act with neglect is "to pay too little attention to, either intentionally or unintentionally; to be

⁹ 2, Fancher and Brown, "Doctors Say CDC Concealed Truth About Condoms For Years." Paragraph 2. The authors note that condoms are known "to offer [even] less protection against sexually transmitted diseases such as gonorrhea, Chlamydia, syphilis and genital herpes."

¹⁰ 3, Heritagehouse76, "Condoms - Do They Really Work?"

¹¹ 4, BHS, EXODUS 20:16.

¹² 5, KJV, EXODUS 20:16. See also DEUTERONOMY 5:20.

¹³ 5, KJV, MATTHEW 19:18. See also MARK 10:19 and LUKE 18:20.

¹⁴ 5, KJV, ROMANS 13:9.

¹⁵ 6, Webster's Dictionary, entry for "negligent," adjective, # 1,2, p 606.

remiss in care for; to omit, as through carelessness,” resulting in harm to those who are placed in the charge of the public servant.¹⁶

If one with a professional duty who is charged with keeping and caring for the public welfare withholds vital information or offers false information - and the one being cared for then endures pain, suffering, disease or death as a direct consequence - this may be termed “professional negligence.” If withholding such information intentionally and knowingly - with the intent of causing pain, suffering, disease or death – directly resulting in any such negative outcomes occurs, there being criminal intent, this may be termed “criminal negligence.”

Committing such negligence in medicine and nursing that results directly in such negative outcomes - save for the abortion industry, which is neither medicine nor nursing - entails civil and criminal liability and accountability. However, this apparently does not apply when political correctness is applied to say HIV/AIDS prevention on the part of government officials, health care providers, educators, business interests, special advocacy groups and of course politicians!

VII. TELL PEOPLE THE TRUTH

The matter of full informed disclosure is certainly a given within traditional medical and nursing communities as a standard of professional conduct to give the public and patients true, full and diligent informed consent on any relevant subject.

The problem and challenge is attempting to bring government and private sources outside of traditional medical and nursing professions to such standards of true, full and diligent information re avoiding HIV and the resulting horrors of AIDS.

Those who are given the duty of serving the public, in whatever station that Providence has placed them into, have a moral duty before GOD and man to tell people the truth. In the case of AIDS prevention, people must be told that condoms are significantly unreliable in the prevention of HIV – as well as other – infections.

People must be counseled honestly and bluntly to avoid the know exposure category risk factors that lead to HIV infection: intravenous drug abuse, homosexual practices and sexual promiscuity being the three largest modes of transmission in the U.S. People must be counseled to abstain from sex until marriage, then enter into a mutually monogamous marital relationship for life between one man and one woman, both of whom must at the start be HIV free.

VIII. IN CONCLUSION

This struggle promises to be an uphill battle for some time to come. However, we in the public health, medical and nursing professions have a secret weapon for the War on HIV/AIDS Prevention - tell people the truth!

¹⁶ 6, Webster’s Dictionary, entry for “neglect,” verb, # 1,2,3, p 606.

This must be combines with action by the legal community to pursue negligent parties who do not provide scientifically accurate HIV prevention information with civil and criminal liability. Legislated accountability would then eventually follow.

These twin engines of truth and liability can, if harnessed, save untold numbers of Americans from needless and completely avoidable HIV infection, and the terrible pain, suffering, disease and death from AIDS and other related calamities!

IX. REFERENCES

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