## South Africa: The ANC government and the AIDS crisis

Barry Mason 5 July 2000

South Africa currently has four million HIV/AIDS cases and the figure is projected to rise to 7.5 million by the year 2010. Yet the ANC government of President Thabo Mbeki has no effective programme to tackle the developing catastrophe. The government's National Council of AIDS does not even have representation from members of local AIDS community groups, health professionals, activists or voluntary bodies.

In 1997 South Africa attempted to obtain cheaper versions of the AZT drug treatment which is available in most western countries. It was blocked by the world pharmaceutical industry, which took up a law suite against alleged breach of intellectual property rights. Even at the lower prices which some companies have now agreed to charge, the South African government says that it is unable to fund the drugs, even for HIV-positive mothers or for rape victims.

Rather than take up any challenge to the pharmaceutical corporations' drive for profit, President Mbeki has recently taken a different tack. He implied that AIDS in Africa was a different phenomenon from AIDS in the West. Furthermore he publicly questioned scientific evidence linking the HIV virus with the AIDS disease. In April, Mbeki wrote to world leaders contrasting the spread of the disease in Africa through heterosexual contact to that in the West, where it first emerged in gay communities in America. Calling for an "African solution to an African problem," he said his government would not "condemn our own people to death by giving up the search for specific and targeted responses to the specifically African incidence of HIV-AIDS".

Mbeki has also sprung to the defence of so-called "AIDS dissidents" such as Peter Duesberg, professor of biochemistry and molecular biology at the University

of California. Duesberg was one of a minority of scientists who questioned the link between HIV and AIDS in the 1980s. Implying that the majority of scientists were blocking a continued discussion, Mbeki suggested that the dissidents were being witch-hunted and claimed that there was "an orchestrated campaign of condemnation" against them.

There have been many occasions in the history of science when individual scientists have been pilloried for their unorthodox views by the majority of their peers. There is, however, no evidence that this is the case with the HIV/AIDS investigations, and none of the so-called dissidents appear to have had their papers barred from publication or to have been sacked from their jobs. So what is the controversy about?

The body of scientific evidence established since AIDS was initially recognised in the early 1980s definitively links the disease's occurrence with the presence of the HIV virus. AIDS is the result of a disease process.

Geographical clusters of the first recognised cases suggested it was an infectious disease with a common cause. The fact that it is transmitted through sexual contact, blood to blood contact, or from mother to child pointed to an infectious process.

Research showed that the common factor between the various groups—gay men, drug users and haemophiliacs—that exhibited AIDS was the presence of the HIV virus. The common precursor to AIDS infection in the differing groups and regions of the world has been the detection of the HIV virus in the bloodstream.

The most convincing evidence of the link between HIV and AIDS is that the drugs that attack the HIV virus exhibit most effect in slowing the AIDS disease process. The main consequence of the HIV virus is to destroy cells that form part of the human immune system. These cells are known as CD4+ T cells (a form of white blood cell) that normally help to overcome an invading infection. The destruction of these cells by HIV leaves the body unable to fight infections and cancers. There is a direct causal relationship between the level of HIV virus and hence the destruction of these cells and the onset of the AIDS condition.

It is because so much more is now understood about the relationship between HIV and AIDS that the alternative theories of the 1980s have been largely rejected. As Professor Francoise Barre-Sinoussi of the Pasteur Institute in Paris who discovered the HIV virus put it: "HIV was discovered in 1983, 17 years ago. We have accumulated so much evidence of the link with AIDS; it is nonsense to try to separate the virus and the disease."

There has been widespread concern amongst South African scientists about Mbeki's April letter. Professor Malegapuru Makgoba, head of the South African Medical Research Council, attacked the role of the AIDS dissidents calling them "failures in their own countries" and said that he was concerned South Africa was becoming "fertile ground for pseudo-science".

In his efforts to create an "African solution" to the AIDS epidemic Mbeki established a panel, which met in Pretoria behind closed doors over the weekend of May 6 and 7 this year. According to press reports, the debate "became heated at times". The panel included Duesberg and other AIDS dissidents, as well as mainstream scientists. All that resulted from the conference was the establishment of a committee of four scientists, two mainstream and two dissident, who will continue the discussion on the Internet. The scientists will meet again in July in Durban.

It is not the first time that Mbeki has been involved in AIDS controversies. In 1997, Mbeki, then deputy president, along with Nkosazana Zuma (then Health Minister) enthusiastically endorsed an anti-AIDS drug developed by three Pretoria scientists. At a cabinet meeting in January that year the three scientists—cryogenics researcher Olga Visser and cardiothoracic surgeons Professor Dirk du Plessis and Dr. Kallie Landaure—promoted their new drug, Virodene, and asked for 3.7 million rand (\$544,000) to continue their research.

One of the major constituents of the drug was a dry-

cleaning solvent, which is normally toxic to humans. The South African Medicine's Control Council (MCC) refused to sanction trials of Virodene, raising concerns over the methodology and ethics of the drug. In response, Zuma pushed for the dismissal of two top MCC officials who were only vindicated and reinstated at the end of last year.

In an article published in March 1998, South Africa's *Mail & Guardian* commented: "The Virodene researchers had so little respect for the humanity of the subjects of their trial—11 seriously ill AIDS patients—that they did not even bother to submit themselves to a committee. Subsequent attempts by the researchers to construct trials have not passed the ethical standards required."

In 1998, it was revealed that Joshua Nxomalo (a personal friend of Thabo Mbeki and a former ANC military cadre) had played a leading role in arranging the meeting between Virodene drug researchers and senior government officials, including Mbeki. He was also one of a group of black investors who had bought into the rights for Virodene.

Recently, Channel 4 News in Britain revealed that it had obtained Virodene company documents showing the firm projected annual profits of £100 million, and that the ANC would have received a 6 percent share had the project gone ahead.

Whether Mbeki's current intervention is just a cynical attempt to divert attention from his government's responsibility in dealing with HIV/AIDS, or whether his "African solution" is solely aimed at developing the profits of a favoured company, is not yet clear. Whatever the reason, it can only hold back progress in tackling the epidemic at the cost of many more lives.



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