Marxism and the AIDS dissidents:

Part 1—the dissidents' critique of orthodox AIDS theories

31 January 2001

Below Chris Talbot replies to a number of letters written supporting the theories of so-called AIDS “dissidents”. In brief, these claim that the link between HIV and AIDS has been invented by Western governments and the drugs companies to create a multibillion-dollar market for the drugs used in the treatment of AIDS; that several of these drugs cause AIDS; and that what has been classed as an AIDS epidemic in Africa in fact consists of people “dying in large numbers from the same diseases they have always died of”. As Chris Talbot illustrates in his reply, whatever the motives of individual dissidents, their claims invariably end up providing succour for the most reactionary political forces and, if accepted, would condemn millions worldwide to certain death.

Chris Talbot's reply will be published in three parts, continuing tomorrow and concluding Friday, February 2. We are publishing below the original correspondence on the subject sent to the WSWS.

My dear Mr. Talbot,

First of all, let me say that I love wsws.org, and visit it almost every day.

Second of all, I would also like to say that I was quite disgusted at your reply to the gentleman having the temerity to question the notion that the so-called HIV causes AIDS.

What is it about so many left-wingers—Marxists and others—that it never seems to occur to them that science/scientists might just as well be corrupt and permeated with bourgeois distortions as any other area of endeavour?

It astounds me that so few left-wingers have even bothered to look into this story—merely from a historical perspective. What is a Marxist, after all, if not a believer in history?

You probably know that prostitutes worldwide are not getting AIDS unless they are drug users. You might not know, however—as the mainstream will never tell you—that the only homosexuals to get sick in the early eighties were also very heavy-duty drug users.

I first became aware that anyone was questioning the HIV-AIDS link in an article I read about Peter Duesberg in the spring of 1990. Duesberg claims that HIV is merely a harmless passenger virus. Bryan Ellison, however, a former student of Duesberg’s, says that Duesberg has sold out. As a virologist, and a former soldier in Richard Nixon’s famous War on Cancer, Duesberg—Ellison maintains—is blind to the notion that there are very likely no such things as retroviruses per se, that the behaviour believed to distinguish retroviruses from virus viruses is in fact just a characteristic which all viruses share.

Ellison says that Duesberg cannot abandon the notion of retroviruses because it was as a retrovirologist that Duesberg made his name.

Peter Duesberg is not all there to the dissident movement, you know. And just, by the by, you are about the third or fourth left-winger I have seen on the net saying that the dissidents “are more properly termed denials”. That same phrase from all of you. Are you in cahoots or just sharing a tendency to be cute? I mean, why are so many distinguished scientists begging to differ, to dissent, more properly termed denials, do you think? All of the dissident papers which I have seen are nothing if not very closely reasoned, and the research backing them up is copious in the extreme. These scientists are not just standing up and denying the mainstream nonsense off the top of their heads, you know...

And a growing number of dissident scientists are saying—I very convincingly, I might add, if you read their articles—that what is popularly known as the HIV Virus has never been properly isolated.

A smaller—but also growing—number of scientists, say, forget about HIV, there is no such thing as AIDS, that these people are dying with their immune systems intact.

And that the human immune system is much more complicated, and much more complicated to assess, than just (looking at) t-cells in the blood. So even if there were such a thing as a virus which Targeted the Human Immune System, the system—and some scientists are saying that the notion of a human immune system as such is a pretty tenuous concept, that it’s really just an hypothesis—is quite simply not that vulnerable.

There are, nevertheless, people who think it would be nice if it were that vulnerable. The Mad Scientists in the Pentagon, and their even Madder Bosses, for a start. There is evidence that they were looking to find a virus which would knock out the human immune system to put in their CBW cache.

Think about it. One-stop shopping. Immune system, knocked out, just like that. Then you can kill people with common cold germs, for example. Very cost-effective. An awful lot cheaper than bombs

And they looked so hard for this virus that they found it. I mean, who do you think the Sainted Robert Gallo of HIV Discovery Fame was working for, for God’s sake, if not the US government?

You may also not be aware that before AIDS came along—as a godsend to US government scientists who were about to lose a lot of taxpayers’ money ‘cause their War on Cancer was going nowhere—the Sainted Doctor Gallo, while he was engaged in the War on Cancer, discovered a retrovirus which caused leukaemia in some chickens. Except, this virus was later determined not to exist, and Robert Gallo’s reputation as an ethical scientist was tarnished.

And then came along a lot of very sick homosexual males...

You refer to the great strides which Peter Duesberg previously made in cancer research. Did he? You looked into this, did you? He was a colleague of Robert Gallo, I know that. Duesberg is credited with making great strides in retrovirology, which some scientists with a lot more technical knowledge under their belts than I, are saying is not valid. I mean, that the field is not valid, forget about the research.

I think D was the first to say that the whole idea of retroviruses causing cancer would not yield non-trivial results. And Duesberg was also one of the first to say that the so-called HIV was misnamed, that it did not knock out the human immune system.

I mean, just think about all the claims Gallo and Co. have made for retroviruses as a class throughout their scientific careers. First, they said that what a retrovirus per se did was cause cancer, which means it invaded a host cell and caused it to go haywire—reproducing indefinitely. Now, they’ve turned around and said it destroys the cells. Well, boys, which is
it?

And you might also be aware that the cells—isolated in 1984—used to make the famous HIV Tests, are still alive and well, 16 years later, in conjunction with the Deadly HIV which is reputed to kill them. Think about that.

And who decided that the Africans—who are dying in large numbers from the same diseases they have always died of—are now suffering from HIV/AIDS? Western scientists, of course. They just went in there, looked at their symptoms—which bear little resemblance to the symptoms of so-called AIDS in the West, and simply said—no tests needed—just said, okay, you have AIDS. It's sexually transmitted. Here's a condom. Just use a condom, you'll be fine. No need for better nutrition/hygiene. A condom is all you need. Think about this, Mr. Talbot. How can you call yourself aScientific Socialist otherwise?

And then the Activists, largely in the West, but some in Africa as well, began lobbying for cut-price drugs—deadly in themselves—to cure this syndrome. There's an awful lot of circularity to this reasoning, wouldn't you say?

The whole thing is nonsense. The notions of viral causality and immune deficiency didn't work on cancer, and they're not working on the health problems of very diverse groups of people who are now said to be suffering from the world-famous AIDS.

The last big viral disease to be conquered in the West was polio. And that was 45 years ago. The virologists have been looking for a similar Coup in the Making ever since.

When numbers of very sick homosexual men started showing up in US urban centres, the virologists and their colleagues must have thought—metaphorically speaking, of course—that they'd died and gone to Heaven.

And so, of course, did the big pharmaceuticals companies. Which is what all this is about, Mr. Talbot. Money. Good old-fashioned money. And lots of it. And why a Marxist wouldn't see this, I have no idea. And money—and again, lots of it, Mr. Talbot, is why health professionals in the field are keeping quiet on this. And many quite decent, honest health professionals (i.e., not suckholes blathering out the Scientific Party Line) in Africa are saying that their patients have AIDS to qualify them for Western grant money, which is not forthcoming for the usual scoundrels.

And many health professionals are breaking the silence, but they are not getting much of a public forum, which is why people like you have heard so little of them. But their numbers are growing.

I keep wondering when all this is going to hit the fan. One of the dissident scientists, Turner in Australia, says he thinks the truth will come out through the courts, when all these pharmaceutical industry victims start suing. I only hope he's right. Already the Internet is full of appeals for people interested in launching class action suits.

The HIV/AIDS story is truly the Scandal of the Age. And when it does hit the fan, as it ultimately must, the dissidents alone will emerge as scientists worthy of the name. The proponent of this fraud, Gallo among them, can then go where they belong, not to Heaven, but to jail.

Yours very truly,

MS

(All emphasis in the original.)

Dear Mr. Talbot,

I am writing, a bit late, to respond to your reply to Mr. Steve Martinot's letter [see: “An exchange of letters on AIDS/HIV” http://www.wsws.org/articles/2000/aug2000/aids-a26.shtml]. I have sent letters to the WSWs expressing similar views as Mr. Martinot. I will take each of your points:

1. You state, “There are dozens of scientific papers establishing that HIV causes AIDS” please tell me which paper you read that so convinced you of this hypothesis. I would suggest you go back and read Dr Robert Gallo's original four papers claiming HIV causes AIDS. When Dr. Gallo announced, at a press conference, that HIV was the probable cause of AIDS, his papers had not been peer reviewed. And since then, he has admitted that his papers contain fraudulent data.

2. Having HIV as part of an AIDS definition is not scientific. And being HIV positive in Africa is not part of the African Banguel definition. Depending on where you live in the world, you may or may not have AIDS. You also state studies have failed to find people who are HIV negative and with a prolonged low CD4+ unless they are suffering from classic diseases. Your examples of cancer and tuberculosis are interesting, considering cancers and tuberculosis are AIDS indicator diseases. Your example only proves Mr. Martinot's point.

3. Signatures of 5,000 scientists was indeed a political move. A close look at the names and their qualifications shows the Durban Declaration was originally penned by about 200 scientists and circulated to obtain more signatures, regardless of their involvement with HIV and AIDS. But more importantly is the effect it had on South African President Thabo Mbeki. Mbeki's life-long record of human rights activism and his major participation to end apartheid has been lost. He is now being portrayed as a villain or a fool because he dared to step outside the AIDS establishment.

4. Antibodies are generally a positive response by the immune system. Vaccines are based on injecting the body with a “faux” virus so the body can produce antibodies and be able to combat the real virus if infection occurs. Your examples of herpes and hepatitis are misleading. After initial infection from either herpes or hepatitis one would show clinical signs of illness within a few weeks, not after years. The virus, as well as antibodies, can and do remain in the body.

HIV testing is not accurate. Simply read the inserts on the tests. The insert also states there is no standard for determining an HIV positive status. With no standard, results do vary. Manufacturers have listed dozens of conditions that can cause false positives, including pregnancy. The web site you refer to also states the accuracy of HIV tests, and goes on say the PCR now makes identifying a person as HIV positive even more accurate. This is false. Dr. Kary Mullis, inventor of the PCR, says the PCR should not be used for HIV testing. In my opinion, if Dr. Mullis, who knows more about the mechanisms and abilities of the PCR than anyone else, says don't use it, then it should not be used.

5. Funding for “dissident” AIDS beliefs does not exist. You state “ideas that have insufficient credibility get ignored”. I don't dispute your statement, however tell me what is insufficient about long-term effects heroin, cocaine, or nitrates have on the immune system?

Your statistics on the decline of AIDS deaths due to three-drug combination is not true. AIDS rates began dropping in 1993, contrary to all predictions except those of dissident scientists. They actually started dropping in the 1980s but serial definition changes allowed more and more people to be diagnosed with AIDS. As the CDC's [Center for Disease Control] HIV/AIDS surveillance reports clearly demonstrate, the official decline in new AIDS cases began several years before protease inhibitors had even received FDA approval. Two years after this decline in new AIDS cases, AIDS mortality also began to decline, as would be expected. Mortality also began declining before protease inhibitors were approved (CDC 1998). Thus, it is impossible for these drugs to be responsible, in spite of widely repeated claims to the contrary.

Statistics in Africa are admittedly calculated from antenatal studies and therefore are prone to not be accurate.

Why is the official solution to treating AIDS (a multiple disease syndrome) limited to a singular expensive and highly toxic approach? Treat immuno-suppression with immunosuppressive drugs. Yes, you are right, Mbeki has refused to pay for drugs for pregnant women. Do you know what AZT is? It is a transplacental carcinogen that will terminate both mother and child's DNA. It will indeed stop HIV transmission, as well as life-sustaining DNA.
I make no attempt to argue Socialism with you. However I urge you to look back at the ’80s and read Dr Gallo’s papers, read about the international lawsuit that followed, read about how AZT received original FDA approval (1987), read the Concorde study, read any number of studies published in medical journals with a more critical eye and the “good” news about drugs and testing does not look so good after all.

I thank you for your time.

Sincerely,

TS

Mr. Talbot treats the issue too lightly. He MAINTAINS simply that the evidence for the HIV Dogma is available. This is only possible to maintain when one is not really acquainted with the alternate position. Most so-called evidence consists of stating that “HIV positives” die earlier than “HIV negatives”. This convinces people because they do not know that the HIV test can at most measure unspecific immunological processes. In somewhat exaggerated fashion some AIDS “dissidents” say: it isn’t HIV which causes AIDS, rather AIDS which causes HIV!

Unfortunately the left has failed miserably in the sphere of science. Chomsky is also very stubborn. A little while ago I discussed this with another AIDS dissident. We came to the conclusion that the Left questions MAINSTREAM politics, but then seeks to retreat into the so-called objective world and safe world of SCIENCE as an alternative.

You were also not able to answer the excellent readers letter from S. Martinot. Very interesting.

Yours,

JF

(Translated from the German. All emphasis in the original.)

Let me begin by explaining the background to this correspondence. The letters reproduced above—along with the letter from Steve Martinot, which I replied to August 26, 2000 [http://www.wsws.org/articles/2000/aug2000/aids-a26.shtml]—are from AIDS dissidents. This is an amorphous collection of people who are grouped around various organisations, web sites and journals. What they have in common is that they all disagree that the HIV virus is the cause of AIDS. A typical standpoint is the following one from Christine Maggiore, who runs Alive and Well AIDS Alternatives in California:

“We do not believe that AIDS is a new disease at all but is rather a new label given to a number of illnesses that have plagued mankind for centuries. This ‘re-labelling’ conveniently and profitably allows the pharmaceutical companies to produce an arsenal of highly poisonous drugs for ‘AIDS’. There is ample proof, however, to show that AIDS drugs, especially AZT, cripple the immune system and are the real cause of those deaths that are declared AIDS related.”[1]

There is also the Rethinking AIDS web site organised by Peter Duesberg, a professor of Molecular and Cell Biology at the University of California at Berkeley, which contains hundreds of pages of articles written by Duesberg, as well as other scientists and journalists. [2] One of the most prominent of Duesberg’s supporters is the Nobel laureate Dr. Kary Mullis, referred to by TS. Mullis invented the PCR (polymerase chain reaction) technique that allows multiple copies of DNA or RNA to be made, enabling it to be detected—a fundamental technique in biochemistry.

Duesberg’s papers, though written in a more technical language, also claim that AZT and other anti-HIV drugs actually cause AIDS. He also argues that “recreational” drugs are the cause of AIDS in the United States and Europe.

Other dissidents include Joan Shenton, of the TV production company Meditel, who has produced documentaries for Britain’s Channel 4 Television and is the author of the book *Positively False;*[3] the Canadian HEAL (Health Education AIDS Liaison) group[4] and the gay rights dissidents such as ACT UP San Francisco.[5] ACT UP’s web site carries photographs of two leading gay activists who support the use of anti-retroviral drugs. Underneath is the caption “Sick of these two sell-outs killing queers with poisonous drugs?”

When drug therapies for HIV/AIDS appeared to be successful, the impact of the dissidents declined, but they stepped back into the media spotlight last year when South African President Thabo Mbeki took up their ideas.

Dissidents have claimed that in Africa AIDS does not exist as an identifiable disease. They maintain it is merely a convenient label for the impact on the immune system of malaria, tuberculosis, cholera and other diseases. A typical statement is the following one from Duesberg supporter Charles Geshekter, Professor of African History at the California State University in Chico: “Calling these deaths AIDS and claiming it is endemic provides tantalizing opportunities for development agencies, academics and biomedical researchers who clamour for more money and state intervention.”[6]

My reply to Mr. Martinot objected to his unserious and irresponsible approach to HIV/AIDS, especially in relation to Africa. Are we really to believe, like Charles Geshekter and as MS suggests above, that the huge increase in deaths in southern Africa are because Africans are just “dying in large numbers from the same diseases they have always died of”? As I said in my reply to Mr. Martinot, even President Mbeki and the South African government have had to accept that there is a crisis that is far greater than the health problems that previously affected the country.

Over the past months there have been a number of investigative reports carried out in Africa that have provided graphic evidence of large numbers of deaths amongst young people and children—schools, factories and whole families are stricken by disease. If the AIDS dissidents believe these accounts to be fraudulent or misleading I suggest that they talk, as I have done, to students from southern Africa, virtually all of whom have experience of an increasing number of deaths among young people.

In my opinion, to accept the position of the AIDS dissidents would be to avoid tackling what is arguably the greatest health catastrophe of modern times. If we were to follow the dissidents and treat this as a mere continuation of previously existing diseases and poverty in Africa, it would be to accept the callous attitude of Western politicians, who are taking no serious action, and allowing millions of people to die.

Before looking at the dissident arguments in detail it is important to examine the political impact they have had in South Africa.

The ANC government has issued a report pronouncing against anti-retroviral drug treatment. It has allowed only limited trials and has refused to make the drugs general availability. Drug treatment will not be available for HIV-infected babies. The government’s own report estimates there are 50,000 children in South Africa who have been infected by their mothers. Using the same argument as TS Health Minister Mano Tshabalala-Msimang declared, “There is a narrow view again that continues to associate prevention of mother-to-child transmission of HIV with the use of anti-retrovirals only…. We know there are other medical interventions…. We know they [antiretrovirals] are toxic.”[7]

It should be pointed out that this “narrow view” is the one adhered to by most scientists and doctors in Western countries and increasingly throughout the world. It was recently recommended by the World Health Organisation as part of the minimum standard package for care of HIV-positive women and their children, specifically stating that “there is no justification to restrict use of any of these regimens to pilot project or research settings”. [8]

While the ANC government denies life-saving drugs to thousands of poor South Africans, moreover, these same drugs will be made available to all health workers who have been diagnosed HIV positive, to all politicians (who can obtain the drugs through their medical aid scheme), and of course to all individuals who can afford to pay for private treatment at world market prices.

The question here is not about the safety or effectiveness of these drugs,
but, as Tshabalala-Msimang admitted in the same speech, one of cost. The
South African government is not prepared to fund a treatment that is
recognised around the world as the best presently available. Nor is it
prepared to make a serious political challenge to the drug companies,
which charge exorbitant prices for their drugs, or the Western
governments that defend the right of the pharmaceuticals to profit out of
sickness and suffering.

Mbeki's record is one of cynical exploitation of the AIDS crisis. Far
from being concerned about the potentially harmful effects of toxic drugs
used to treat HIV/AIDS, he has been responsible for promoting a drug
that is based on a toxic dry-cleaning solvent, and from which his party
stood to make financial gains. As reported on the WSWS, in 1997 when
Mbeki was Deputy President, the ANC government attempted to launch
an AIDS drug called Virodene.[9] Two members of the South African
Medicine's Control Council (MCC) were sacked for opposing trials of the
drug and were only reinstated at the end of last year. The ANC would
have received a percentage of the profits from the drug. Further questions
about Virodene and a number of AIDS patients who died on a drugs trial
in South Africa have since been raised in an article by Helen Epstein in
the New York Review of Books [10].

AIDS dissidents have provided a useful diversion and justification for
President Mbeki and his government's refusal to tackle the AIDS crisis,
and their South African followers have played a particularly pernicious
role. The South African Medical Research Council (MRC) presented
statistics to the AIDS advisory panel showing the impact of AIDS on the
country's death rate. Mbeki set up the advisory panel, which is made up
of orthodox scientists, who maintain that HIV does cause AIDS, and AIDS
dissidents in equal numbers, ostensibly to clarify the issues surrounding
AIDS.

The statistics that the MRC presented to the panel revealed a change in
the pattern of mortality in South Africa. A much higher mortality
occurred in the younger age groups at the end of the 1990s than at the
beginning of the decade. These figures support the hypothesis that a new
disease was at work.

The government then challenged the MRC figures. They got a company
called Statistics SA to produce a rival report, which concluded that the
MRC analysis was flawed. As Statistics SA later admitted, they
misinterpreted the MRC figures. "Having later seen the more detailed
presentation of the MRC" they later told the South African Mail and
Guardian newspaper, "Statistics SA agrees that the mortality profile, especially that of females, has changed over the last decade."[11]

On the basis of Statistics SA's initial findings, however, the South
African magazine noseweek carried an editorial ridiculing the MRC
research and called for the resignation of its head, Professor Malegapuru
Makgoba, who has played a key role in attacking dissident positions.
The managing editor of noseweek and co-author of the editorial is Marten du
Plessis, an office bearer of the dissident grouping Forum for Debating
Aids in South Africa. The noseweek editorial has now appeared on the
news section of Duesberg's web site but not the clear refutation made in
the Mail and Guardian.

Mbeki's flirtation with the AIDS dissidents is a shoddy manoeuvre. The
AIDS dissidents have, at the very least, been guilty of naïveté in
associating themselves with a government whose actual record is far
removed from the near saintly image that TS portrays. I can only assume
that TS has not followed South African politics over the last decade.
Mbeki was recently praised by the World Bank for his adherence to free
market policies. He is pursuing the privatisation of the public sector that
will result in hundreds of thousands of job losses, when unemployment is
already almost 40 percent. The gap between rich and poor is increasing
under his government, the only new development since the days of
apartheid being that there are now a small number of very rich black
people. When Volkswagen workers took strike action last year, Mbeki
denounced them for "pursuing selfish and anti-social purposes", the
police were used against them and the most militant elements were
sacked. Despite promising universal access to clean water in every
election manifesto since apartheid ended in 1994, Mbeki and the ANC
government have taken no effective action to change a situation in which
millions have no access to safe drinking water. As a result there is now a
serious cholera epidemic in the country.[12]

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11. Lies, damned lies and noseweek, Daily Mail and Guardian, October 10, 2000

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