AIDS in Zaire: Providing clues to a medical mystery
AIDS, the mysterious malady that robs the body of its immune system, is as impenetrable as the African jungle regions that apparently spawned it.

An AIDS epidemic now rages in Zaire, a country in central Africa that is four times the size of Texas, and there are cases in surrounding countries as well.

But attempts to solve the AIDS mystery are complicated by conflicting theories on the origin and transmission of the disease, and by the reticence of the government of Zaire to reveal information, even the number of cases.

The fact that AIDS came from Africa is virtually the only thing known about the origin of Acquired Immune Deficiency Syndrome.

Some experts say it comes from monkeys and was absorbed by humans who eat them. Once ingested by humans, they theorize, the virus mutated and turned into whatever causes AIDS.

Ann Giudici Fettner, a medical writer who has been specializing in coverage of AIDS in Africa for four years, subscribes to the monkey theory. She has been to Zaire, and knows that people there are hungry. They eat monkeys by the truckful, she wrote in a May 1985 issue of New York Native, a weekly gay newspaper.

"Viruses jump from one species to another, dragging their DNA after them, and start churning out their own viruses," she said in a recent telephone interview.

Others think the AIDS virus is a variation of swine fever. If so, AIDS could also be transmitted through contaminated pork products.

Fettner said that although she needs more conclusive evidence, the swine fever theory holds some credence. She does think that HTLV-III, the virus believed to cause AIDS, operates in conjunction with another virus. She
doubts that HTLV-III, as structurally weak as it is, could cause so much damage by itself.

Also, large segments of populations in some countries, such as Kenya, have tested positive for antibodies, but have no known cases of AIDS.

But studies released by the New York State Health Department in September 1985 found no correlation between swine fever and AIDS.

There are “lots of hypotheses that are unproven,” says Dr. Daniel William, a physician of internal medicine and president of Physicians for Human Rights at St. Luke’s/Roosevelt Hospital. “[The AIDS virus] wasn’t even in humans until the sixties or seventies.”

AIDS apparently made its way to the U.S. via Haiti. Says Dr. William: “When Zaire [became] independent, officials brought in upper-middle-class, college-educated Haitians to help the government on a managerial level. There was a network of migrations from Haiti to Zaire and back. There is speculation that gay men brought it back [to the U.S.] from [vacations in] Haiti.”

Although Haitians have since been declassified by the federal Centers for Disease Control (CDC) as a high-risk group, the original panic seriously hurt tourism there, and has damaged Haiti’s economy.

The situation in Zaire is “dreadfully serious,” says Fettner. She says that two hospitals in Kinshasa, the capital, receive up to 20 cases a day.

Experts agree that AIDS in Africa is transmitted mainly through unsterilized hypodermic needles.

“Nobody sterilizes needles well in Zaire,” says Fettner.

Fettner says that most of the African population doesn’t understand the necessity of
cleanliness and sanitary conditions. The people are so primitive, she says, that “a lot don’t even understand that intercourse makes babies.”

They also don’t know the dangers of misusing medicine, says Fettner. They want injections when they are sick, so witch doctors or other unqualified personnel set up offices and give injections.

AIDS is also transmitted sexually in Zaire. More than 50 percent of the people in Zaire with AIDS are female. This raises the possibility that the U.S. epidemic may yet affect heterosexuals through vaginal intercourse. Fettner says that homosexuality is almost unknown in the country, although Zairians sometimes engage in anal intercourse as a form of birth control.

Because many women in Zaire and other African countries are circumcised, they have a higher risk of developing AIDS from any kind of intercourse. Circumcision ranges from simple clitoridectomies, or removal of the clitoris, to massive excision of all external female genitalia, says Fettner. Women insist on it because it makes them more marriageable.

Sex and childbearing, says Fettner, “are not fun” for these women. Even during intercourse they tear and bleed. “If you want to exchange blood and body fluids, [the most likely way AIDS is transmitted], find a circumcised female,” she says.

Despite the seriousness of the situation, it is difficult to get any information about what is being done in Zaire to combat AIDS. The government of Zaire, aware of how Haiti suffered from being linked to the disease, is closemouthed about what is going on—and is reticent about providing data and blood samples for research.
The CDC, according to a State Department spokesman, has established a joint research center in Kinshasa with Zaire’s government. But the CDC has not responded to requests for information, Fettner said.

Meanwhile, it is hard to tell whether the AIDS epidemic in Africa will become as widespread in the U.S. and elsewhere. No one is sure of the incubation period of the virus—estimates range from three to 20 years, some longer—and it is impossible to tell exactly how long the disease has existed. The first cases were diagnosed in Africa in the late 1970s.

An answer does not seem to be near, either in the U.S. or Zaire. But Fettner is convinced that “the thing came from Africa and is going to be solved in Africa.”

This article was reported by Theresa Braine, Richard Kearns, and Barclay Palmer and written by Theresa Braine.