Big, Bad Media Bugout

Why the “supervirus” story may end not with a bang but a whimper

May 1, 2005 By Jeff Hoover

Scary new HIV strain discovered,” blared the February 12 *Miami Herald*. “Rare strain of HIV resists drugs, builds rapidly into AIDS,” trumpeted the February 14 *Wall Street Journal*. Only three days after New York City health commissioner Thomas Frieden, MD, made the bombshell February 11 announcement that a local man had been diagnosed with triple-drug-resistant and rapidly progressing HIV, worldwide media outlets took the sensationalist superbug story hostage—each to advance its own agenda.

After Frieden’s televised press conference—which included a public-health alert for medical providers—little additional information about the new patient zero and the consequences of this new strain followed. Was this a public-health crisis or a one-off phenomenon? Ongoing studies of the man’s virus and his sex partners would, at best, slowly yield an answer. But the media onslaught continued.

Syndicated right-wing columnist Cal Thomas conjured the gay men = promiscuity = evil = death formula: “There have been some reports of ‘suicide missions’ by uninfected men who knowingly have sex with HIV positive men, believing that to be infected gives them a certain societal status.” Thomas’ argument was bolstered by patient zero’s irresistible hook—a middle-aged gay man who had reportedly had unprotected sex with hundreds in recent months while using crystal meth.

Within the gay community, author Charles Kaiser wrote in the *New York Daily News*: “A person who is HIV positive has no more right to unprotected sex with someone else than he has the right to put a bullet through that person’s head.” Nonexperts and experts alike seemingly crawled out of AIDS dormancy to debate the efficacy and longevity of HIV meds and prevention.

Scientists, researchers and activists were quoted arguing whether conclusive evidence supported Frieden’s revelation. HIV codiscoverer Robert Gallo voiced skepticism. Activist Richard Jefferys told the *Gay City News* that “based on the [press release], to call this a new strain is incorrect.” Right-leaning HIVer Andrew Sullivan noted in his blog that it’s “extremely common for newly infected people to see their CD4 counts plummet in the early stages before their own immune system bounces back.” Others correctly noted that some HIVers receive AIDS diagnoses within a year of infection, though a sizable number also take 10 years or more.

David Ho, MD, director of the Aaron Diamond AIDS Research Center (ADARC), where the patient was treated and the strain identified, addressed a packed, hastily organized session at the February 24 annual Retrovirus conference in Boston. He and his colleagues fielded oft-hostile questions. “Only additional investigations will reveal whether this is an isolated case,” he said. “Irrespective of the outcome, the public-health implications of this single patient should not be minimized.” At press time, the man’s “untreatable” virus was reportedly responding to combo therapy. No additional superbug cases have arisen.

Was Frieden’s alarm and the media blitzkrieg justified? Pulitzer Prize–winning AIDS journalist Laurie Garrett (*The Coming Plague*) says yes—even if confusion and panic had ensued. “Denial and silence are the true dangers,” she wrote in a *Los Angeles Times* op-ed, adding that the news should spur drug companies to “create new HIV drugs” to confront future mutant viruses. “We can’t tell our public-health officials we would simply rather not know the bad news about AIDS.”

Indeed, knowing the “bad news” about AIDS—and reinforcing infection fears—may help those most at risk. Yet the unmistakable response to the media hysteria among many gay men remains a puzzled “Is that all there is?” Indifference will become the true deadly contagion if health officials, facing atypical HIV infections, keep crying wolf—that is, unless the supervirus somehow proves worthy of its super PR.

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