# Editor’s Letter

May 1, 2005 By Walter Armstrong

I write this on Easter, a celebration of rebirth. But we in the HIV community are marking a different season, which descended suddenly on February 11 with the “supervirus” public-health emergency. We see only the rebirth of fear.

The case, by now, is famous. A gay New Yorker in his 40s, who had stayed uninfected for almost two decades, seroconverted last fall. In recent years, he’d begun using crystal meth and attending the marathon unprotected-sex parties it fuels. Like meth itself, his virus is immensely powerful and nearly untreatable, and his first lab numbers were terrifying: 40 T cells and resistance to 19 of20 HIV meds. By February 11, he was reportedly off crystal, on treatment and helping the health department contact his sex partners. But many, of course, were anonymous. And given the crystal use and unprotected sex among gay New Yorkers, this man’s infection may be only the first to be identified. There could have been, by February 11, hundreds more.

On the steps of City Hall that day, the city’s health commissioner, Thomas Frieden, MD, fed the press a worst-case scenario. Flanked by AIDS service organization honchos, gay pols and other advocates, he said, “It is likely there are others infected with this strain and this individual has infected others.” To HIVers he exaggerated the risks of reinfection: “You need to protect yourself against being infected with another strain of HIV which could make you very sick even if you’re doing well now.” Our leaders chimed in with variations on the “safe-sex wake-up call” theme. The story multiplied and mutated faster than the supervirus itself. A typical tabloid headline shrieked: *AIDS Nightmare Rocks America*.

Facing the spectre of a serial-killer supervirus stalking the city, we may sound petty asking whether our officials and advocates acted in good faith. After all, a public alarm could finally discipline the entire crystal-sex subculture: Get clean, get condoms, above all, get tested. And following our leaders’ relentless sermon that AIDS is still a deadly disease, calls to hotlines, visits to testing centers and, no doubt, donations are up again. Indeed, what most comforts those who gathered at city hall seems to be the unmistakable sign that fear—the raw AIDS dread not seen in more than a decade—is reborn.

But why? Frieden’s nightmare scenario has—thankfully—so far failed to materialize. Despite an unprecedented nationwide hunt for matching strains, we’ve seen only the one lonely case. The man is faring better than expected: His five-drug combo is partially controlling his virus, though his immune system has yet to rebound. (Could the sheer stress of the frenzied headlines, doom-and-

gloom science and community hand-wringing, not to mention becoming the right wing's posterboy for barebacking druggie burn-in-hell homos, bear some blame for his T-cell count?) As this "emergency" evolves, the celebrated return to fear looks increasingly like a trick by authorities and advocates who have, understandably, thrown up their hands at our high rate of drug use and unsafe sex.

Thanks to Frieden, the media has its new patient zero, and the man will have to fight to protect his anonymity and his health. But our questions should cut deeper than his mere identity; they should make us question our own. Why does a man in his 40s come to value staying uninfected less than losing himself in a drugged-out desire? As a man in his 40s who has stayed uninfected, I can sympathize. Being negative is nothing to be proud of; being positive is no cause for shame. If we longtime neggies have anything to sing about, it is finding the courage to get over AIDS dread and to take informed risks for the sake of pleasure. We make mistakes. But we'd rather risk getting carried away—and infected—one crazy night than live our days frozen in fear. That city officials and AIDS leaders would revive our fears rather than celebrate our courage may be the real emergency here.

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