Mailbox

July 1, 2006

DO TELL

I was happy to see Regan Hofmann, POZ's new editor in chief, on the cover of the magazine (April 2006). When I was diagnosed, one of the first things I was recommended to do was not tell anybody but my family. I cannot tell you how many times I've been asked, "Why do you even say anything?" I do because I'm not ashamed of being positive, and not telling only contributes to the stigma surrounding HIV.

James Ozmun
Cleveland, Tennessee

BELIEVE IT OR NOT

I wish "Dead Certain" (April 2006)
had offered a factual and balanced report on AIDS rethinking that would not have made opportunistic use of my daughter Eliza Jane's sudden death. Instead, we have a fanciful tale of my daughter's demise. Correcting these mistaken ideas would take an entire article (see "POZ Flaws" at www.JusticeforEJ.com). A series of chest X-rays taken at the ER provided no evidence for the coroner's decision four months later that [Eliza Jane] succumbed to PCP, a decision that contradicts the coroner's own findings at autopsy: no inflammation of the lungs. Further, Eliza Jane had an unusually high lymphocyte count, when the opposite is associated with the immune-suppressed state that allows PC to develop into PCP. Seven months after the release of my daughter's autopsy report, we are still waiting for lab evidence of Eliza Jane's HIV status. What's more, my husband remains HIV negative despite a decade of unprotected contact during our relationship.

Christine Maggiore
Los Angeles

I appreciated your article "Dead Certain," especially the last two paragraphs, which suggest the world not immediately shut out "AIDS denialists," who question conventional wisdom on the causes and existence of AIDS. The article excavated issues *POZ* hasn't truly explored. However, the term "AIDS denialist" clearly means these people aren't "facing up to reality." But most of the people labeled "denialists" aren't in denial that AIDS exists, but are questioning only the cause of those illnesses composing the syndrome the CDC has named "AIDS." The continued use of "denialists" renders any valuable debate impossible.

Name withheld by request
Berlin, Germany

Correction: In “Early Birds” (POZ, May 2006), federal HIV treatment guide-lines recommend that HIV meds should be offered to people whose CD4s are below 350, not 250.

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