

# The Aids Project Newsletter

48 Deering Street

Portland, Maine 04101

Subscription - \$10.00 per year

Editor - David Ketchum

The Aids Line: 1-800-851-AIDS

or  
775-1267

JULY 1987

"Ye Ed" goofed! The correct address for The Aids Project is listed above. The P.O. Box 10723, as listed in the June issue of the newsletter is no longer being used by us. Most of the mail that was sent to the P.O. Box, has been forwarded to us, but for those of you who had mail returned to you, we regret the inconvenience. We thank those who have responded promptly to our subscription request, and to those who have yet to respond, please use the form at the end of this newsletter for that purpose.

## EDITOR'S NOTE

On Memorial Day, there was a public candlelight vigil in Monument Square in Portland followed by an Ecumenical Memorial Service at the First Parish Unitarian Church. The following speech was made by Vincent Boulanger. Vincent is a person with Aids (PWA):

"Welcome, and thank you for coming here tonight to remember our friends, if I may use the pun, 'who have gone to Florida', and to support those of us who are still packing our bags.

I've been very lucky to have had so many friends who love and support me; and I've also been lucky to have the support of my family and relatives, who have encouraged me to continue my work with the Aids Project and other Aids related interests.

But unfortunately, this is not the case with other PWA's. They are rejected by friends and lovers, and abandoned by their family members. The main reason for this is that Aids is still thought of as a gay disease by both straight and gay people. A virus cannot pick and choose its victims, and soon all of your lives will be touched somehow by Aids.

I only hope that we are able to save the future victims of this disease from this stigmatism which has made the trip to Florida a painful and lonely ride for far too many people.

With your help, I know that we can overcome the fear and hate, and create a new kind of love and understanding of all people.

Thank you again for coming tonight."

Special invitations to this Memorial Service were sent to Representatives Joseph Brennan and Olympia Snowe, and to Senators George Mitchell and William Cohen. Their responses to this invitation have been photo copied and are shown within this newsletter.

## STATISTICS

As of May 29, 1987, there have been 53 diagnosed cases of Aids in Maine. Southern Maine 34 Central Maine 13 Northern Maine 6 Of the total 53 cases, 21 have died.



JOSEPH E. BRENNAN  
1ST DISTRICT, MAINE

COMMITTEES  
ARMED SERVICES

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RESEARCH AND DEVELOPMENT  
SEAPOWER AND STRATEGIC  
AND CRITICAL MATERIALS  
MERCHANT MARINE AND FISHERIES

SUBCOMMITTEES  
MERCHANT MARINE  
COAST GUARD AND NAVIGATION  
PANAMA CANAL/  
OUTER CONTINENTAL SHELF  
MAJORITY WHIP AT-LARGE



**Congress of the United States**  
**House of Representatives**  
**Washington, DC 20515**

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WASHINGTON, DC 20515  
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PORTLAND  
111 COMMERCIAL STREET  
PORTLAND, ME 04101  
207-780-3382

AUGUSTA  
128 STATE STREET  
AUGUSTA, ME 04330  
207-623-2893  
TOLL FREE NUMBER  
1-800-445-4092

May 21, 1987

Thank you so much for your kind invitation to attend the AIDS Candlelight Memorial Service and Vigil. Unfortunately, because of a scheduling conflict, I will be unable to attend.

I would like to praise the efforts of you and your fellow volunteers to call attention to AIDS and the devastation it causes to its victims and their families.

Open acknowledgement and discussion of AIDS is a critical step in educating the public about this grave national health risk and means of prevention.

We need to pull together to fight this terrible disease. Thank you for your efforts and your compassion.

Sincerely,

*Joseph E. Brennan*

Joseph E. Brennan  
Member of Congress

JEB/mkf

FOREIGN AFFAIRS  
JOINT ECONOMIC COMMITTEE  
SELECT COMMITTEE  
ON AGING

WASHINGTON OFFICE  
133 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-1902  
(202) 225-6308

**Congress of the United States**  
**House of Representatives**  
**Washington, DC 20515**

2D DISTRICT, MAINE

MARGARET CHASE SMITH  
FEDERAL BUILDING  
202 MARLOW STREET, ROOM 209  
BANGOR, ME 04401-4960  
(207) 949-0432

TWO GREAT FALLS PLAZA  
SUITE 78  
AUBURN, ME 04210-5813  
(207) 786-2451

197 STATE STREET  
POST OFFICE BOX 722  
PRESQUE ISLE, ME 04769-0722  
(207) 784-8124

May 20, 1987

Thank you for your kind invitation to participate in the AIDS Candlelight Memorial Service and Vigil in Portland on May 25, 1987. Regretfully, I will be unable to attend. However, I appreciate you thinking of me and would like to express my best wishes for your service and vigil.

Like you, I am deeply concerned over the spread of AIDS and the suffering it has inflicted on thousands of people in this country and around the world. I believe it is essential that research continue in order to prevent the spread of the disease and to discover a cure, and that education programs be instituted to increase the knowledge and understanding of this disease.

On April 9, the House of Representatives adopted a budget resolution which includes \$970 million in budget authority for AIDS. This includes \$550 million for research, \$350 million for prevention, and \$70 million for treatment and drug testing. This total is \$436 million more than the Administration's request. Although the budget resolution is nonbinding, it does show congressional intent to increase funding in order to fight this disease.

Again, thank you and best wishes.

Sincerely,

*Olympia J. Snowe*

OLYMPIA J. SNOWE  
Member of Congress  
2nd District, Maine

**NATIONAL NEWS**

**Delta Agrees To Boycott Group's Demands On AIDS Issues**

**SAN FRANCISCO** — Politically correct gays, it's now OK to fly on Delta Airlines again. The national boycott against Delta Airlines has been called off since the airline has agreed to the four demands presented by the S.F.-based Mobilization Against AIDS.

Delta has agreed to publicly apologize for their representatives arguing that a gay life was "of less value" than a non-gay one because of the possibility he might contract AIDS. They further stated that neither Delta nor its representatives would ever make such statements again.

They also agreed to establish a policy that HIV positive people are welcome as passengers on their airline and that all HIV positive people authorized to travel unaccompanied by their physician, may do so on their flights.

Delta further pledged to honor a 1986 commitment to educate its employees about AIDS by contracting expert personnel, and to make a gesture of support to the national struggle to end AIDS as a means of correcting previous mistakes.

**Rockers Huey Lewis & The News Donate \$225K to AIDS Center**

**SAN FRANCISCO** — Once again proving that it's hip to care. Bay area pop stars Huey Lewis and The News have donated \$225,000 to set up a first-of-its kind center in San Francisco to educate physicians on how to treat patients with AIDS.

The HLN (Huey Lewis and the News) Physicians AIDS Training Center comes as a result of the band's manager Bob Brown seeing a 60 minutes broadcast about AIDS and San Francisco General Hospital. "This is a disease that affects the whole country, not just one segment of the population," stated Brown. "Huey and the band wanted to start helping here at home."

**MASSACHUSETTS**

**AIDS program set:** Every household in Massachusetts will receive a brochure on the deadly disease AIDS under a four-point education program announced Thursday Gov. Dukakis. The Dukakis plan will expand voluntary AIDS testing for marriage license applicants, prisoners and others generally at risk, but stops short of mandatory testing except for the military and for immigrants from areas of the world where AIDS is epidemic. The program also requires staff members at drug abuse clinics and other such centers to offer patients information about AIDS.



## United States Senate

WASHINGTON, D.C. 20510

Statement of Senator George J. Mitchell

AIDS Project Memorial Day Service

Portland, Maine

May 25, 1987

AIDS is a disease for which there is no known cure, for which the prognosis is death, and which strikes unpredictably and silently across age groups, class lines and national borders.

Our laws are written for the protection of the public health against diseases definitive in time -- diseases for which the period of contagion is known, definite and short-term, not for diseases which are potentially transmissible throughout a lifetime.

Until the advent of this disease, modern societies were unfamiliar with the possibility of plague. Yet, with AIDS, the entire world faces what could be the plague of the 20th century.

Six years after the disease was first formally recognized, ten years after its initial manifestations were recorded and investigated, governments are just beginning to respond.

When the leaders of the world's seven industrial democracies meet in Venice, two weeks from now, AIDS will be on the agenda, along with currency exchange rates, Third World debt and nuclear missiles.

Next month, from Quito, Ecuador, the Pan-American Health Organization will transmit by satellite a hemispheric conference on AIDS, at which the ministers of health of our hemisphere will meet to begin dealing with the public health problems caused by this death.

And in Congress, serious debate is finally under way. But we need more than debate. We need research, we need education, we need assistance for those stricken, we need compassion.

The testimony of history is evidence that the fear, the anxiety and the hostility our own society has manifested in the face of AIDS is neither unexpected nor unusual. It is the universal response of human societies faced with deadly disease.

But the other side of that picture is the heroism, the compassion, the caring that so many have showed to the victims throughout these tragic episodes, as so many are doing today in the case of AIDS. It is on that spirit of caring that we must construct a public policy and an international attack against this common enemy of all humanity.

## MATERIALS

The following book is available from; Alyson Publications  
40 Plympton Street  
Boston, Mass. 02118  
Please add \$1.00 for postage if ordering only one book. If ordering by Visa or Mastercharge, please give them your account number, expiration date, and your signature.

## Experience is the best teacher

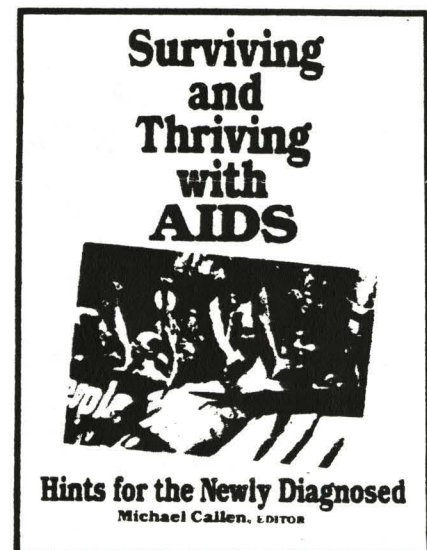
**SURVIVING AND THRIVING  
WITH AIDS, edited by Michael Callen,  
\$6.00**

The People With AIDS Coalition has put together this booklet, packed with almost 150 pages of informative articles, all of them written by people with AIDS, ARC, or their concerned friends. Along with photos and cartoons, their message is one of survival and living an enriching life -- advice that can be heeded by the ill and the healthy.

Below is an excerpt from Michael Callen's introduction:

I am one of the lucky ones; I have survived more than four years after my diagnosis. I believe that as a survivor I have an obligation to pass on what I have learned from my own experiences and to keep alive the wisdom developed by the many "generations" of People with AIDS I have known. The brave and singular men (and woman) to whom this guide is dedicated each played a unique and selfless role in proposing, developing, living and promoting the concept of PWA self-empowerment.

The overarching principles which resonate throughout the essays collected from diverse authors are these: AIDS need not be viewed as a



death sentence. There is life after diagnosis. We must fight to retain as much control over our lives as possible. Many of the authors of this collection are living those beliefs today. Those authors who lost their lives to AIDS died living the truth of these premises.

The task ahead of us -- defeating AIDS -- is formidable. It is hoped that this guide will provide some tentative signposts along the difficult path to victory.



Dear Friends:

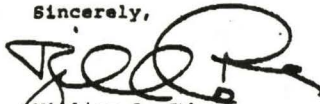
I am sorry that I could not be with you tonight. However, I wanted to let you know that I share in your sympathy for those who have suffered from AIDS and in your concern for the dangers that this disease threatens.

AIDS is nothing short of a disaster. Its etiology, its latency, and its stigma conspire to make this disease the unprecedented public health menace that it has become. Current trends portend that this disease could overwhelm our health care system and strain public resources. However, we must not allow this disease to overcome our values, ethics, and compassion.

I do not know what the nation's -- or the world's -- answer to the AIDS epidemic can be. I do not think that anyone has a very good answer yet. A few years ago, the disease virtually did not exist. We have learned a great deal since and are still learning. I join you in hoping and praying that the world learns the secret needed to stop and to cure this disease.

Thank you for responding with concern and compassion rather than fear to the plight brought on by this dread disease.

Sincerely,



William S. Cohen  
United States Senator

## MATERIALS cont.

The following two books are also available from Alyson Publications. Ordering information on page 3.

**AIDS: A Guide to Survival**, by Peter Tatchell, \$7.00. Despite the suffering that AIDS has inflicted on the gay population, writes Tatchell, it no longer need be treated as a death sentence. Here he argues that it is possible now to fight back; he shows what can be done to halt the spread of the HTLV virus, how HTLV-positive individuals can resist the deterioration of their immune systems, and how the gay community can organize to win the support it needs from government agencies.

**THE ADVOCATE GUIDE TO GAY HEALTH**, by R.D. Fenwick, with Nathan Fain, \$7.00. AIDS isn't the only health hazard facing gay people; here is information on many other aspects of staying healthy that are too often overlooked.

## SPECIAL REPORT

"Dealing With Too Many Deaths" is reprinted with permission from the Gay Mens Health Crisis (GMHC) of New York City.

The cruelty of Aids and the pain of death, are very much a reality here in Maine.



## Dealing With Too Many Deaths

by Michael Shernoff CSW, ACSW

People who work in any part of the AIDS field today are like soldiers serving on the front lines. Enduring the constant bombardment of being surrounded by so much illness and death some of us naturally seem to be suffering from shell shock. From time to time nearly everyone worries about themselves and their reactions. As a therapist I often hear people ask, "Is there something wrong with me?" and, "Am I responding normally?"

These are some of the things we've all been bombarded with.

Last week John's lover of three years died after fifteen months of being ill. His best friend has just been diagnosed with ARC. All John can feel is relief that his lover's suffering is finally over.

Sarah, a CIW for the past two years, has just had her third PWA die. She is fearful that she's becoming callous because she hasn't felt like crying since this person's death.

In Harold's 46-unit Chelsea apartment building there have been seven AIDS-related deaths.

Roberto and Michael have already lost one good friend, and three others have ARC or AIDS.

Gino's been a physician in Manhattan with a largely gay practice for over fifteen years. Prior to AIDS, a patient of his would die on the average of once every year and a half. In the past four years over 40 have died from AIDS, and more than one hundred of his patients know they are HIV-positive, or have ARC or AIDS.

In ten years of being a therapist, I have never had one of my clients die. In the past three years, 12 people in my practice have died from AIDS.

With the recent deaths of two GMHC staff and one board member as well as other staff members being ill, all of us have been once again forced to deal with the final reality of AIDS and what it means.

The gay, lesbian, and AIDS service provider communities are experiencing a phenomenon unprecedented in modern times.

Large numbers of young people are dying. It is not uncommon for many of us to know more peers who are terminally ill or who have died than do our parents who may be in their seventies.

Several aspects make this shocking and difficult to deal with. First are the sheer numbers of people who are sick and who have died.

Second is the age of those who are ill.

Each of us knows that one day we will die. Normally we do not expect to confront this reality until we are older. And yet here we are in our 20s, 30s and 40s surrounded by friends and loved ones who are sick and dying—and well aware of the possibility that we ourselves may be incubating this illness. Every day we are faced with reminders of our own mortality.

Often, after having lived sixty, seventy or more years, the process of aging may help prepare a person for death, and some people even feel ready to die at the end of long and productive lives. So much of our work is to help people put their final time with dignity, serenity and peace. Yet there is also the challenge of surviving with serenity.

How then do we cope and continue to do the work?

The answers are not easy ones.

Now more than ever we need to reach out to people who are supportive and can really be there for us. These may be other people in your department at GMHC or your team members. They may be your friends, family, lover, therapist, counselor or religious leader.

It is also crucial that we recognize all the feelings that can arise in us. Some normal responses may be anger, sadness, depression, exhaustion and a sense of being overwhelmed or powerless.

If you need to cry, do so. If crying just doesn't happen, don't try to force it. There is no right way or wrong way to go through this.

Grieving is a process that requires time to complete. Research shows that some people don't even begin to mourn until many months or a year after the death of a loved one. You may think you've dealt with someone's death well, but months or a year later you find yourself suddenly and "unexplainably" unhappy and morose.

So many of us are experiencing what has been referred to as "bereavement overload." This means that we have not had the opportunity to complete our mourning for any one person before other deaths occur, thus complicating and extending our process of grieving.

AIDS has forced many people to feel as if they are living under an emotional siege, and the effects are cumulative.

You may find yourself overreacting hysterically to the news that someone you hardly knew has died—when perhaps you didn't cry at all for a close friend or PWA with whom you worked.

One characteristic of this bereavement overload may be general emotional impairment which can take many forms.

Some people describe a chronic low-grade depression. Others pour themselves into volunteer work. You

may find yourself not as emotionally available to family, a lover or friends as you once were. One man described simply becoming numb to loss.

We are living through an unrelenting horror, and we need to acknowledge this fact.

Give yourself a chance to take a break from AIDS from time to time. Make sure you schedule regular time to play, hangout, exercise or be silly. Socializing with people who are not as immersed in AIDS can also be helpful.

You may also need a break from doing AIDS-related work—either temporarily or for good. Certainly don't feel guilty if you feel the need to stop for a while.

We're fighting a war, and, like soldiers on the front lines, we too require rest and relaxation in order to continue. ■

A longtime GMHC volunteer, Michael Shernoff, CSW, ACSW, is a therapist in private practice with Chelsea Psychotherapy Associates in Manhattan.





## Drugs Used in the Treatment of Opportunistic Infections and Cancers Associated with AIDS

Last year, we printed a listing of drugs generally used in the treatment of opportunistic infections and cancers frequently seen in people with AIDS. Since that time, a number of new drugs have been tested and some appear promising, especially for people who have experienced severe side effects from traditional drug therapies.

Even as progress has been made in researching anti-viral agents to reduce and hopefully eliminate human immunodeficiency virus replication, clinicians have also learned a great deal about the infections and cancers that strike immune compromised individuals. Especially promising are those drug therapies that are being used prophylactically to prevent the recurrence of life-threatening infections such as PCP.

The list presented here is intended as a guide to facilitate communication between patient and physician. No one should self-diagnose or self-

prescribe. All drug therapies carry with them some risk of side effects, and certain drugs should not be used in combination with one another. Some of the drugs listed here are experimental in nature and the long-term effects are not known. Talk to your physician, ask questions and make sure you understand the implications of any decisions you and your physician make together.

The Volunteer would like to gratefully acknowledge the help and cooperation of the following people who provided the information on this list:

- Paul Corser
- Dr. Patrick Hennessey
- Dr. Lawrence Higgins
- Dr. Marc Rubenstein
- Dr. William Sirotky
- Dr. Barbara Starrett

### EMPLOYMENT OPPORTUNITY



## AIDS SUPPORT SERVICES COORDINATOR

The AIDS Project, located in Portland, which provides public education about AIDS and coordination of support to people with AIDS in Maine is looking for a full time trained professional to coordinate a wide variety of social services and support for people with AIDS, AIDS Related Complex (ARC) and HIV anti-body positive.

This individual will advocate on behalf of people with AIDS and ARC, develop and maintain contact with a variety of public & private agencies and care providers throughout the community, work with clients, their families and caregivers to facilitate the meeting of the needs of clients.

The ideal candidate for this position must be a caring and sensitive, trained professional who can work independently to coordinate a wide variety of support services for clients. This person must have a knowledge of: AIDS, private and public agencies and institutions, community resources, crises intervention and practice, problem solving and short term counseling techniques. In addition, this individual must have the ability to: manage a growing caseload dealing with many stressful situations, deal with death and dying issues, and be able to adequately manage his or her time in a productive manner.

This is a unique position that will deal with many issues requiring the imaginative and creative use of a persons talents and resources. If you think you are up to this challenge and want to be involved in the forefront of providing professional assistance to people in Maine confronted with AIDS, please send your resume detailing your professional background, along with a letter briefly explaining your reason for interest in this position and your salary requirements in complete confidence, no later than Friday, June 26, to:

**THE AIDS PROJECT**  
48 Deering St.  
Portland, Maine 04101

The AIDS Project is a true equal opportunity employer.

	DRUGS	SIDE EFFECTS
A. Drugs for Thrush/Candida	<i>Nystatin</i>	Rare diarrhea, gastrointestinal distress, nausea and vomiting
	<i>Clotrimazole</i>	Same as above
	<i>Ketoconazole</i>	Hepatitis, nausea, vomiting, abdominal pain, headache, dizziness, fever, chills, light sensitivity, diarrhea, increase in breast size, itching. Do not take with antacids
B. Drugs for Cryptococcus	<i>Amphotericin-B</i>	Peripheral neuropathy, blurred vision, hepatitis, rash, nausea and vomiting, diarrhea, cramps, anemia, phlebitis, weight loss, irregular heart beat, fever, chills, loss of appetite, body aches, low potassium, kidney problems.
	<i>5 Flucytosine</i>	Change in kidney/liver function, nausea, vomiting, diarrhea, rash, anemia, confusion, headache, sedation.
C. Drugs for Pneumocystis Carinii Pneumonia (pcp)	<i>Trimethoprim/Sulfa (Septra)</i>	Kidney damage, depression, loss of appetite, abdominal pain, hepatitis, diarrhea, headache, neuritis, insomnia, apathy, fever, chills, anemia, rash, light sensitivity, mouth pain, nausea and vomiting.
	<i>*DFMO</i>	GI upset, possible nausea and vomiting, low platelet count, possible kidney problems.
	<i>Pentamidine</i>	Low blood sugar, drop in blood pressure, kidney damage, pancreatitis, decrease in white blood cell and platelet counts.
	<i>Dapsone</i>	Anemia, liver inflammation, nausea, vomiting, pancytopenia (decreased red cell [anemia], white cell and platelet counts).
	<i>Fansidar</i>	Skin rash, mild and reversible decrease in white blood cell count (WBC), nausea, headache.
	<i>Trimetrexate</i>	Side effects not available.
D. Drugs for Toxoplasmosis	<i>9-Deazatnosine</i>	Side effects not available.
	<i>Pyrimethamine</i>	Loss of appetite, vomiting, anemia, tender tongue, hair loss.
	<i>Sulfonamides</i>	Mouth pain, hepatitis, headache, neuritis, insomnia, decreased hearing, kidney damage, fever, chills, anemia, rashes, light sensitivity, joint pains, nausea, vomiting, diarrhea, loss of appetite.
	<i>Clindamycin</i>	Diarrhea, abdominal cramps, skin rash, unusual thirst, weakness, tiredness.
	<i>BW301</i>	Side effects not available.
E. Drug for Herpes Simplex/Zoster	<i>Acyclovir</i>	Inflammation of injection site, rash, sweating, decrease in blood pressure, headache, nausea, possible kidney problems.



## MEDICAL UPDATE cont.

### F. Drugs for Kaposi's sarcoma

<i>Vincristine</i>	Diarrhea, increased urination, oral ulcers, headache, vomiting, neuritis, constipation, difficulty walking, hair loss, sensory loss, cramps, fever, weight loss.
<i>Vinblastine</i>	Decrease in white blood cells, depression, rash, nausea, vomiting, constipation, diarrhea, loss of appetite, neuritis, headache.
<i>Etoposide</i>	Chills, fever rash, neuropathy, low blood count, nausea, vomiting, diarrhea, loss of appetite, hair loss.
<i>Doxorubicin</i>	Loss of appetite, diarrhea, tender injection site, bone marrow depression, heart failure, hair loss, nausea and vomiting.
<i>Bleomycin</i>	Vomiting, weight loss, loss of appetite, pneumonia or fibrosis of lungs, rash, skin tenderness and darkening, fever, chills.
<i>Alpha Interferon</i>	Fever, nasal congestion, weakness.

### G. Drugs for Lymphomas

<i>Methotrexate</i>	Headaches, blurred vision, acne, anemia, diarrhea, vomiting, liver toxicity, blood in urine, decreased kidney function, pneumonia, mouth ulcers, decreased white blood cells, nausea, fatigue, fever, chills, rashes, light sensitivity, hair loss.
<i>Cyclophosphamide</i>	Blood in urine, hair loss, dark skin and nails, lung fibrosis, secondary cancers, decreased white blood cells, loss of appetite, nausea, vomiting, liver dysfunction, oral ulcers.
<i>Procarbaine</i>	Anemia, nausea, vomiting, loss of appetite, dry mouth, diarrhea, constipation, hair loss, rash, headaches, insomnia, nightmares, confusion, malaise, fever. Avoid alcohol.
<i>D-Penicillamine (Cupramine)</i>	Fever, sore throat, chills, bruising/bleeding, blood in urine, skin rash, oral ulcers, blunting of taste perception, loss of appetite, nausea, vomiting.

### H. Drugs for TB

<i>Isonniazid</i>	Hepatitis, peripheral neuropathy, memory impairment, anemia, fever, rash swollen glands (should be used with B6).
<i>Ethambutol</i>	Headache, dizziness, confusion, neuritis, gout, joint pain, anemia, visual disturbances, rash, anorexia, nausea, vomiting, abdominal pain, fever.
<i>PAS</i>	Nausea, vomiting, diarrhea, abdominal pain, fever, rash, anemia, hepatitis, goiter.
<i>Rifampin</i>	Sore mouth, colitis, hepatitis, rash, itching, headache, fatigue, visual disturbances, fever, kidney dysfunction, "flu-like" syndrome, heartburn, loss of appetite, nausea, vomiting, gas, cramps, diarrhea.
<i>Cycloserine</i>	Rash, dizziness, convulsions, headache, tremor, confusion, slurred speech, depression, weakness.
<i>Ethionamide</i>	Neuritis, smell disturbances, blurred or double vision, headache, rash, decreased blood pressure, acne, hair loss, vomiting, increase in breast size, diarrhea, metallic taste, hepatitis, depression, drowsiness.
<i>Streptomycin</i>	Hearing loss, decreased potassium, impaired kidney function.
<i>*Clofazimine</i>	Upset stomach, purplish skin.
<i>*Ansamycin</i>	Stomach upset, possible bone marrow dysfunction, possible seizure.
<i>Amikacin</i>	Impaired kidney function, decreased hearing, auditory nerve damage.
<i>Rifabutin</i>	Side effects not available

### I. Drugs for ITP (Low Platelet Count)

<i>Gammaglobulin</i>	Rash, hives.
<i>Cyclophosphamide</i>	(see Section F & G)
<i>Vincristine</i>	
<i>Danazol</i>	Acne, increased hair, deepening voice, decreased testicle size, hepatitis, rashes, oily skin or hair.

May 26, 1987

Dear Sir/Madame:

In November 1986, the Lemuel Shattuck Hospital, a 325 Commonwealth of Massachusetts Public Health Hospital, opened a 10-bed A.I.D.S. Unit in response to the continued need for more long term care of people suffering from this disease.

We are always looking for caring, qualified RN's or LPN's to join our team approach to the care and treatment of A.I.D.S. patients.

If you are interested in becoming a vital part of our staff dedicated to the treatment of A.I.D.S., or if you would like further information, please call the Nursing Office at Lemuel Shattuck Hospital at 522-8110, extension 404.

Please share this information with your group and peers.

Thank you for your consideration.

Sincerely,

*Pauli Marr, R.N., M.S.*

Mrs. Pauli Marr, R.N., M.S.  
Director of Patient Care Services

EMPLOYMENT OPPORTUNITY cont.

*The Commonwealth of Massachusetts*  
*Executive Office of Human Services*  
*Department of Public Health*  
*Lemuel Shattuck Hospital*  
*170 - Arbor Street, Jamaica Plain, 02130*

TELEPHONE: 522-8110



## MEDICAL UPDATE cont.

J. Drugs for Lymphoid Interstitial Pneumonitis	<i>Cytoxan</i>	Blood in urine, painful urination, fever, chills, sore throat.
K. Drugs for Salmonella Typhimurium	<i>Ciproflaxact</i>	Nausea, vomiting, diarrhea, skin rash.
L. Drugs for Diarrhea	<i>Spiramycin</i>	Itchy skin rash, gastrointestinal irritation (cramps, upset stomach, etc.)
M. Drugs for CMV (Cytomegalovirus)	<i>DPHG</i>	Side effects not available

## Archaeologists Unearth Dark Age Rubbers

LONDON, U.K. — Recently, archaeologists exploring a British castle dating back to the 1640s turned up what appears to be a sign of safer sex awareness in the Dark Ages: condoms made of fish and animal intestines believed to have been brought back from France by soldiers seeking to avoid transmission of venereal diseases. Guess they used them to lessen the risk of those one-knight stands.

## ON THE LIGHTER SIDE



## Boston Hookers Get Their Condoms Back At Last

BOSTON — Area prostitutes being freed from jail, may now get their condoms back.

The prostitutes had complained that when they were brought in for questioning or arrested, police officers took their condoms in addition to other possessions, but refused to return the condoms upon releasing them.

One station even has a glass container filled with confiscated condoms. The prostitutes urge the customers to use the condoms to prevent possible transmission of AIDS.

Police are being reprimanded for this action. "When a prisoner is arrested, their property is held," stated Nancy S. Gleason, police spokesperson. "When a person is bailed, their property should be returned to them. That includes condoms."

## EMPLOYMENT OPPORTUNITY cont.

## MATERIALS cont.

The book listed below, can be ordered from any Bookland location.

George Jacobs and Joseph Kerrins' "The AIDS File" (Cromlech Books, \$7.95, paperback) is a primer on the disease "intended to wake up those who have not yet become aware of the gravity of the situation. It will also answer questions they and everybody else will have as they realize how our lives depend on being informed." Jacobs is a Massachusetts-based writer and Kerrins, a gynecologist, teaches at Boston University School of Medicine.

## AIDS ACTION Committee JOB DESCRIPTION

Job Title:	Assistant Coordinator of the Support Service Team
Responsible to:	Coordinator of Support Services Team
Salary range:	\$21-24,000
Job Objective:	To assist the coordinator in recruiting, training, and professional management of support service team volunteers
Duties:	<ul style="list-style-type: none"> <li>• Assist the coordinator in recruiting, screening, and training of SST volunteers</li> <li>• Evaluate SST volunteer performance to ensure quality service delivery</li> <li>• Supervise and oversee SST support group leaders</li> <li>• Monitor SST volunteer job satisfaction and provide ongoing volunteer morale boosting</li> <li>• Provide crisis intervention and consultation to SST volunteers</li> <li>• Provide ongoing education and training for SST volunteers.</li> <li>• Attend all client service department meetings, SST meetings, and other meetings as assigned by coordinator</li> <li>• Keep accurate, accessible, and timely records on all volunteers</li> <li>• Liaison between SST volunteers and other AIDS ACTION personnel</li> <li>• Provide Coordinator of Support Service Team monthly reports on volunteer progress and service activity</li> </ul>
Qualifications:	<ul style="list-style-type: none"> <li>• AIDS sensitivity and knowledge</li> <li>• Sensitivity to ethnic minorities</li> <li>• Thorough understanding of the medical and psychosocial issues presented by AIDS/ARC and HIV diseases</li> <li>• Proven personnel management skills and experience</li> <li>• Proven training and volunteer relations skills</li> <li>• Proven direct service experience in human services setting</li> <li>• Experience with and/or demonstrated sensitivity to people with HIV-related problems</li> <li>• Ability to work with multi-disciplinary professional and volunteer care teams</li> <li>• Flexibility in work hours</li> <li>• Multi-lingual skills desired</li> </ul>

AIDS Action Committee of Massachusetts in an Affirmative Action/Equal Opportunity Employer. People of Color, Women and Physically Challenged Individuals are encouraged to apply.

Send resume and cover letter to: Administrative Director/SST  
AIDS Action Committee of Massachusetts  
661 Boylston Street  
Boston, MA. 02116

## CALENDAR

JULY 3 - 5 - Symposium XIV  
See attached

# Symposium XIV

July 3-5, 1987

Coming Out For Freedom

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### SYMPOSIUM XIV COMING OUT FOR FREEDOM

Friday, July 3, 1987

University of Maine, Orono

Registration Begins	12 Noon
Workshops	4 p.m.-6 p.m.
Lesbian Sex	
Gay Men's Sex	
Dinner Break	6 p.m.-8 p.m.
Contra Dance	8 p.m.-11 p.m.

Saturday, July 4, Orono

Low Impact Gayrobics	8 a.m.-9 a.m.
Welcome and Announcements	9:30 a.m.
Keynote Speaker	9:45 a.m.-10:45 a.m.
Lois Reckitt, N.O.W.: Human Rights Campaign Fund	
Workshop Period I	11 a.m.-12 noon
Lunch	12 noon-1 p.m.
Workshops	1 p.m.-5 p.m.
Group Dinner	6:30 p.m.-8:30 p.m.
Fireworks in Bangor (optional)	Approx. 8:30 p.m.
Dance — Damn Yankee	10 p.m.-1 a.m.

### CHARLIE HOWARD MEMORIAL DAY

Sunday, July 5, 1987

Bangor

Charlie Howard Memorial Service	10:30 a.m.
Unitarian Church, Union St.	
March Downtown	12 noon
Memorial Speaker	1 p.m.
Darrell Yates Rist	

Davenport Park, corner of Cedar & Main Streets

JULY 7 - Doors Opening, A Positive Approach To Aids. A 55 minute video being shown at the Aids Project Office - 48 Deering St. - Portland, Maine. 7:00 p.m. sharp. Please call 774-6877 to confirm that you are going to be there. Admission is FREE. All are welcome to attend.

## DOORS OPENING: A Positive Approach to AIDS

In January of 1985 I began with a group of six men with AIDS in my living room. We refused to play "ain't it awful." Instead we looked for ways to heal our bodies and to dissolve fears. We created a place where there was love and acceptance, affection and safety. We began to learn to love ourselves and to realize our minds had a definite ability to contribute to our wellness. As the group grew we also attracted friends and lovers, then hospice workers and nurses, alternative therapy practitioners and even a few MD's became a regular part of the Wednesday night group. Occasionally we even have a parent join us. Today this group attracts over four hundred people a week; yet the sharing and caring and intimacy remains.

The principles taught here transcend the issue of AIDS! They speak to the need for healing in all of us. This video is not just about AIDS. It is a bringing together—a balancing of body, mind and spirit in an atmosphere of love and acceptance. This intimate view of the Wednesday night AIDS group is a testimony for the power of love to heal.

—Louise L. Hay



## CALENDAR cont.

- JULY 8 - The Governor's AIDS ADVISORY COMMITTEE meeting will be held at 9:00 a.m. at the Senator Inn - Embassy Room - Augusta.
- JULY 11- Doors Opening, A Positive Approach To Aids. The 55 minute video will be shown at 12:00 noon sharp. Details of the video are listed on page 8. Again, please call to confirm that you will be there-774-6877. Admission is FREE. All are welcome.
- JULY 14- "Chance Of A Lifetime" - A safe sex video from the Gay Mens Health Crisis will be shown. This is for Gay and Bisexual men only. 7:00 p.m. sharp - one hour duration with discussion. Please call 774-6877 to confirm that you will be there. Admission is FREE.
- JULY 18- "Chance Of A Lifetime" - the safe sex video listed above, will be shown at 12:00 noon sharp. Again, men only - call to confirm - admission is FREE.
- JULY 25- 35th Annual Health Care Forum - "Facing Up To Aids" - at the Westin Peachtree Plaza Hotel - Atlanta, Georgia - keynote speaker Dr. Neil Schram - Dr. Gerald Friedland. Further details, call; Area 202-857-1162.
- JULY 30-AUG. 2- 4th Annual Lesbian Physicians Conference - at the Spring Hill Conference Center - Minneapolis, Minn. - Please contact the Womens Issues Committee c/o AAPHR Box 14366 San Francisco Cal. 94144.
- JULY 30-AUG. 2- Life Death & Challenge of Aids - 3 day residential workshop - Aliveness Project - 5307 Russell So. - Minneapolis, Minn. 55410 - Financial assistance is available for PWA's & PWArc - \$85.00 covers room-meals-workshop. Call Area 612-929-8256 or contact the Aids Project - Portland - 774-6877.
- AUG 4-7- American Association of Physicians for Human Rights (AAPHR) - 1987 Annual Meeting & Aids Update - Hyatt Regency - Minneapolis, Minn. Further details please call Area 612-824-1741.

## ONGOING CALENDAR

Every Tuesday at the Aids Project - 48 Deering Street - Portland - there is a group meeting for all PWA's, PWArc, caregivers, and family members, to share your thoughts and feelings relative to Aids. The meeting is conducted by Jacob Watson, M.A. Jacob is a spiritual teacher and psychotherapist. A graduate of the University of Pennsylvania, Beacon College and the Gestalt Institute of Cleveland, he has trained with the Elizabeth Kubler-Ross Center.

## SUBSCRIBE

### SUBSCRIBE NOW TO THE AIDS PROJECT NEWSLETTER

THIS NEWSLETTER RELIES TOTALLY ON SUBSCRIPTIONS TO EXIST. WE ARE GRATEFUL TO THOSE WHO HAVE SUBSCRIBED, AND TO THOSE WHO HAVE NOT, PLEASE DO SO NOW. \$10.00 COVERS ONE YEAR (12 ISSUES). PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO "THE AIDS PROJECT". THANK YOU.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

WHEN YOU SEE SOMEONE WITHOUT A SMILE,  
GIVE THEM ONE OF YOURS.....





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