

Pentagon Shutting Down Major AIDS Research

Cutbacks Raise Concern Among Area's Military People With HIV

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By Justin Gillis
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Since learning he had the AIDS virus six years ago, Navy linguist Barry Williams has had access to one of the most sophisticated AIDS research programs in the country. The Columbia man, like thousands of other military people with the virus, got the latest drugs, careful monitoring and first-rate care.

Now, that research program is about to die.

In an era of shrinking budgets, U.S. military planners have decided that AIDS treatment research doesn't have much to do with the prime goal of military medicine: maintaining a fit fighting force. They have ordered cutbacks that will mean shutting down nine major AIDS studies, scaling back two others and canceling plans for two new ones.

For many military people in the Washington area, that is bad news. Maryland, Virginia and the District are home to 589 HIV-positive military people who are enrolled in the studies. They fear losing their access to cutting-edge AIDS research.

"They're going to throw people out and say, 'Here, go to the VA, and lie sick in a VA bed, and hope,'" Williams said. "I think it's a crime. It just shows the biggest lack of compassion, and a lack of intelligence, too."

For AIDS research, it also is bad news, some scientists say. Military researchers will be forced to sharply scale back a huge study of the way the AIDS virus works in the body over time. It is the largest such study ever undertaken and has been an important component of American research into the disease.

Military leaders don't question the quality of the re-

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search they've been conducting, or the need for it, but they say it's not their job. They say AIDS treatment research should be handled by civilian agencies while the military focuses on what it does best: preventing infection among the troops. So they're redirecting some money to a big trial in Thailand of a potential AIDS vaccine.

In recent years, Congress has routinely given the Pentagon more money than it asked for to conduct AIDS research. But now, with the new mood on Capitol Hill, military planners are assuming that that won't continue and are making plans for big cutbacks.

"We're very proud of the quality of the research that has been carried out to date," said Col. William Bancroft, who is in charge of the military's infectious-disease research. "But the reality of the situation is, facing the possibility of substantially less money, we have to adjust the program."

Much of the military's AIDS research is conducted by a group Congress created for the purpose, the Henry M. Jackson Foundation for the Advancement of Military Medicine, based in Rockville. A dispute over funding first came to public attention in February, when The Washington Post reported that the Pentagon was declining to spend some \$30 million that Congress had appropriated for the research.

President Clinton read about it. White House Chief of Staff Leon E. Panetta got involved and told the military to spend the money. In many people's minds, that ended

the issue.

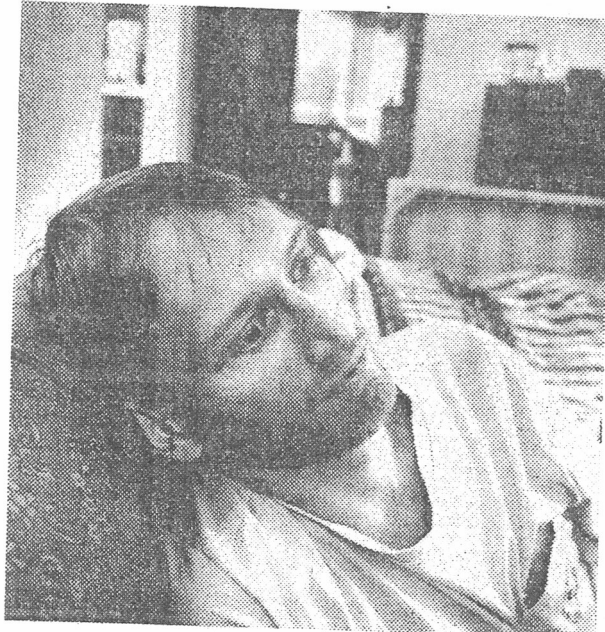
In fact, new plans for research cutbacks have been drawn up by military planners in recent months. The money Congress appropriated will be spent, but much of it will be used in the Thailand trial, and some will go toward closing out studies. Among those to be shut down: a study, involving 150 military people, of whether combinations of anti-HIV drugs work better than the single drug AZT.

The research program once employed more than 230 people. The Jackson Foundation already has laid off half the staff of some units, including nurses and researchers. Under current plans, more layoffs are to come later this year, and the nine studies will be shut down by December.

Those who will feel it most are military people battling infection with the deadly virus. The Washington area has the biggest such concentration of people in the country. Since the beginning of the epidemic, 9,411 active-duty military people have tested positive for the virus. Including retirees and people out on medical leave, nearly 3,000 have enrolled in research studies in the last five years.

Scientists contend that shutdown of the military's AIDS research would be a major loss in the effort to find a cure. They note that the military population is unique. Because soldiers, sailors and airmen are screened regularly for HIV—or the human immunodeficiency virus that causes AIDS—the infection is caught in them earlier than in the civilian population.

That has allowed military researchers to mount a huge study of the "natural history" of HIV infection. That kind of research is vital, scientists say, because only when



BY BILL O'LEARY—THE WASHINGTON POST.

AIDS patient Barry Williams says of the shutdown: "It just shows the biggest lack of compassion."

they understand what HIV is doing to the body over time can they design treatments to stop it. Under current plans, the database the military researchers have gathered would be maintained, but little new information would be added to it.

"It's a critical study," said Kenneth Wagner, who works in the military research program. "This is a national treasure, as far as I'm concerned."

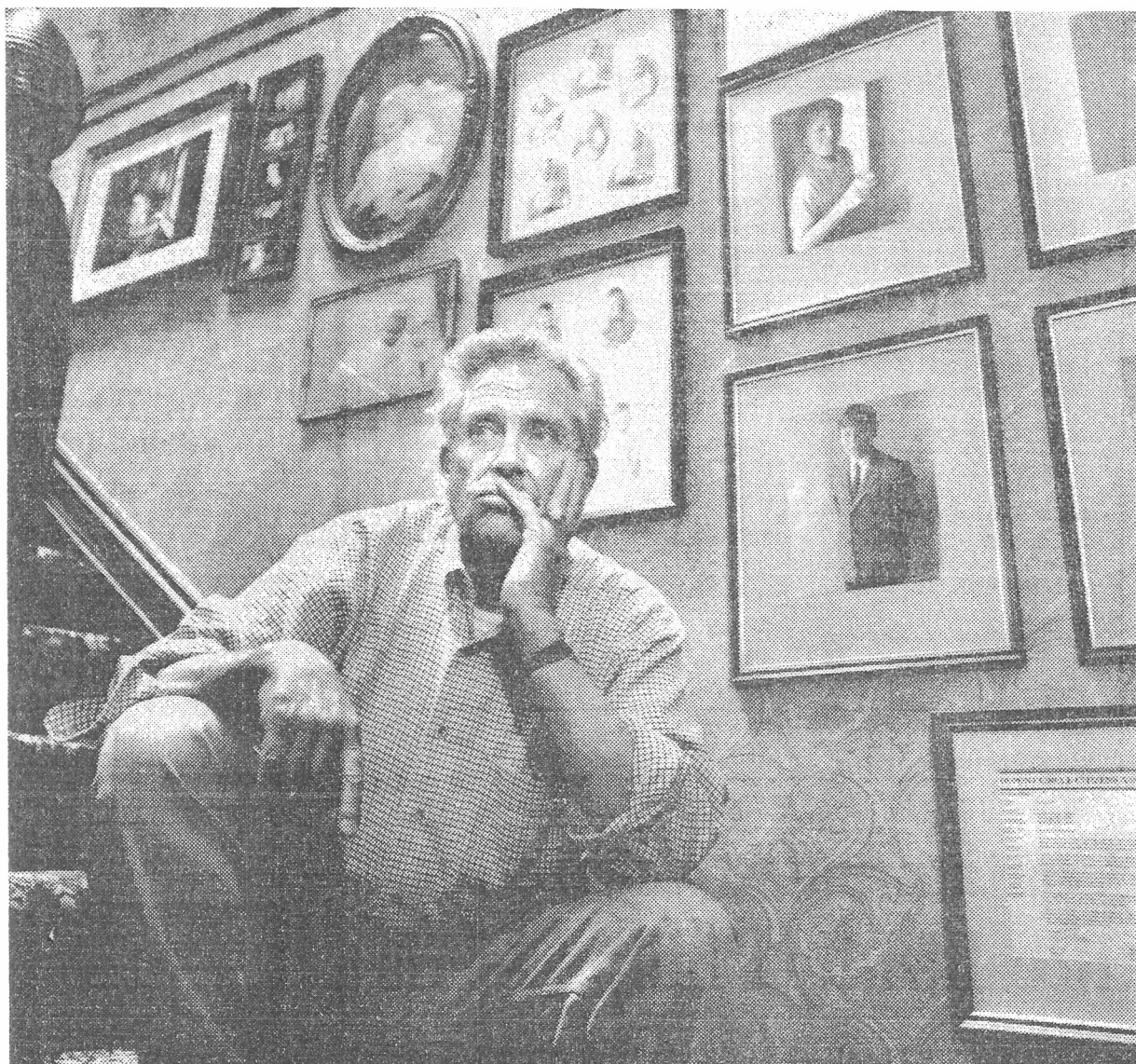
Scientists say military people are a good population for testing new drugs and treatments. They tend to take pills as often as they're told and to show up to get their blood drawn any time they're asked.

George Nelson, a retired Navy commander living in Washington, is enrolled in the natural-history study. He got AIDS in 1985 from a blood transfusion in a Navy hospital. Without knowing it, he passed the virus on to his wife, Phyllis, who sickened rapidly and died. Now, Nelson is battling AIDS himself, with help from people at the Jackson Foundation.

"They give me all sorts of tests," Nelson said. "I go there and take advantage of it, because I get tender loving care."

The military research cuts come on top of several recent contractions of AIDS services in the District, where the HIV virus is spreading more quickly than in any other U.S. city. The city recently closed one of its two clinics for sexually transmitted diseases, and the Washington area's largest AIDS clinic—Whitman Walker—has announced it will limit its social work and medical care for AIDS patients.

The military cutbacks don't mean that Nelson, or any other military people, would lose access to basic medical



BY DUDLEY M. BROOKS—THE WASHINGTON POST

George Nelson, a retired Navy commander who lives in the District, got AIDS in 1985 from a blood transfusion. He says he goes for help to the military's Jackson Foundation "because I get tender loving care."

care, a fundamental right for military people and retirees. But in the context of AIDS, the most promising treatments are experimental, and the only way to get them is through research studies.

The military research is particularly important for active-duty personnel, who are transferred constantly from place to place and would have trouble getting time and permission to enroll in a civilian trial. Through the Jackson Foundation, they get access to the same cutting-edge treatments that civilians can get by going to places such as the National Institutes of Health.

Active-duty people are under orders not to talk to the members of the press, but privately, those battling HIV infection say the research cutback will hurt.

An Air Force officer living with HIV in Washington said he has a supportive commander right now and would probably be able to enroll in a civilian trial. But if he gets transferred, or if his commander changes, it could be a different story. He's enrolled in the Jackson Foundation's trial testing drug combinations against AZT.

"I like being in the study," the officer said. "They see

me every two months. They give me a great deal of attention. If it were to totally dry up, I don't know what I would do."

Barry Williams, the Navy linguist, remained on duty in a desk job for several years after testing positive for HIV. He received experimental drugs through the Jackson Foundation. Eventually, though, illness forced him onto disability. "I loved the Navy, and I would love to still be in it," he said.

Last week, freshly discharged from the hospital, he had a friend help him spackle walls and pack boxes. He is moving from Maryland to Atlanta, partly to be near one of the few Department of Veterans Affairs hospitals with a big AIDS treatment program.

He had hoped to continue taking part in research at the Jackson Foundation's offices at the National Naval Medical Center in Bethesda. He wanted to enroll later this year in a trial of a promising new group of drugs called protease inhibitors. Now, his plans are off.

"I really wanted to stay with the same doctors," he said. "But they're going under, and it's a shame."