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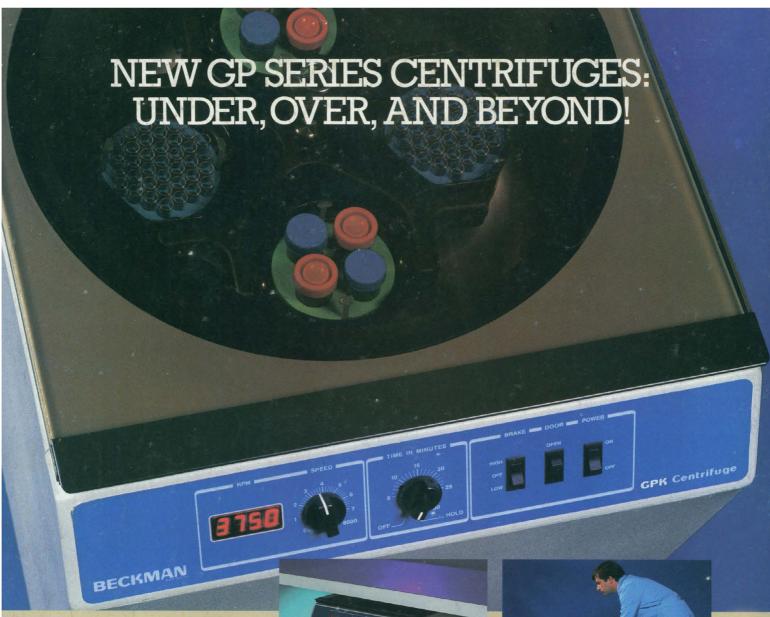


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COVER Manifestations of concern with AIDS, the acquired immunodeficiency syndrome, in the United States: children receiving instruction on AIDS prevention in the classroom and the burned-out house of a family with AIDS-infected children. This issue of *Science* includes articles on the epidemiological, legal, economic, and ethical issues of AIDS. See page 573. [Cover design by Sharon Wolfgang, Washington, DC; classroom scene, Mauro Calingo, Silver Spring, MD; and house, Marc Beaudin, *News-Press*, Fort Myers, FL]

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This Week in

Science

Effective AIDS education

F the approximately 50,000 reported victims of AIDS in the United States, about half have died, and no one has been cured (page 592). These and other figures and facts about AIDS and its transmission have been widely disseminated and even assimilated yet have not apparently impressed people enough to alter behavior in most at-risk populations. Many factors have contributed to this failure. For example, the public has received mixed, confusing messages from authorities: they have been told both that the virus can be isolated from saliva and that there is no evidence that AIDS can be contracted through kissing. Conflicts also arise from the clash of pragmatism and morality: drug users can reduce their risks by using clean needles, but, because drug use is illicit and illegal, needle-exchange programs have been unpopular. Fineberg discusses these and other obstacles to effective education and concludes that a well-coordinated, comprehensive approach to education remains to be organized in the United States. With such a program, which necessarily would incorporate attitudinal and behavioral changes for both individuals and society, success in stopping the spread of AIDS will not be assured, but, without it, success is unlikely. Seven more articles and Koshland's editorial highlight other aspects of the epidemic in this issue (pages 573 to 617 and page 541).

Diamond films

ARDNESS, strength, low-electric and high-thermal conductivity are features of diamond-like films (page 623). Rabalais and Kasi describe a new reproducible technique for depositing diamondlike films onto gold, tungsten, silicon, and other substrate surfaces. A carbon ion beam was directed onto an atomically clean surface in an ultrahigh vacuum chamber. The effective beam was at low energy, favoring a diamond over a graphite form of carbon deposition; initially a

carbide monolayer formed, but, with additional deposition, the film grew in a diamondlike structure. Preparation of electric-insulating and heat-conducting films and doped semiconducting films are expected to be among the important applications to result from this new technique.

Quasar

▼ HE sequence of events that results in the birth of a quasar is believed to include violent collisions of molecular clouds in gas-rich spiral galaxies, a period of rapid star formation, formation of a dust-enshrouded quasar, and finally the disappearance of the dust (it would be blown away by the combined pressure from stellar winds, supernovae explosions, and radiation pressure from the quasar) to reveal the underlying quasar (page 625). A candidate for a quasar in the dust-enshrouded stage was detected in 1983 during a survey of the sky by the Infrared Astronomical Satellite; IRAS 14348-1447, the brightest and most distant object in the Bright Galaxy Survey, is sufficiently luminous to qualify as a quasar (a strongly emitting quasistellar object), and subsequent observations from the earth, described by Sanders et al., support this classification. The strength of the luminosity of IRAS 14348–1447 suggests emissions from a pair of interacting galaxies rather than an isolated galaxy, which would have lower luminosity. The strong infrared emission (quasars have typically been detected through strong optical and ultraviolet emissions) is consistent with an infrared-emitting shroud of molecular gas brought in by colliding galaxies and concealing, until the dust blows off, much of the optical energy generated by the central quasar source.

Cells and viruses

ONINFECTIOUS influenza viruses can get inside cells, and, even though the virus does not replicate and new viral proteins are not

synthesized, the virus-containing cell can become a target for killing by a primed T lymphocyte (page 637). Inhibition of viral neuraminidase activity facilitates this process, probably by ensuring that much of the virus is available for processing by the target cells. (When neuraminidase is active, surface receptors for the virus may be inactivated.) Yewdell et al. show with a cultured cell line that, as long as the membrane of the influenza virus can fuse with the membrane of the target cell, the virus can be internalized; in the cytoplasm, the virus releases its ribonucleoprotein core, and virion proteins are then processed in a way that makes the host cell a target for killing. It is thus not necessary for a virus to be infectious in order for it to be recognized by killer T cells.

Radiation resistance and ras activation

ELLS in which a mutated ras oncogene is activated have greater intrinsic resistance to ionizing radiation than do their counterparts in which the oncogene has not been activated (page 645). Sklar found that the effect of the ras oncogene was independent of the malignant transformation process: revertant cells that had lost the transformed phenotype but in which ras remained activated retained resistance to radiation. Why the activated oncogene (whose protein product is in or near the cell membrane) enhances radiation resistance (a largely nuclear process) is unclear but of great interest because mammalian cells are increasingly being exposed to lethal ionizing radiation (environmental exposure or exposure during cancer therapy or diagnostic procedures). It may be possible to use information on ras activation to predict what human tumors will best be treated by radiation therapy and which ones will resist the effects of irradiation. And, if the mechanism by which ras activation enhances radiation resistance can be understood, it may even be possible to increase a tumor cell's sensitivity to ionizing radiation through activation of ras.

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The AIDS Issue

lagues are identified with impoverished nations and past centuries, not with modern civilization. "It can't happen here, and it can't happen now" is the reaction of industrialized societies as a 20th-century epidemic of a fatal disease attacks their countries. The unthinkable is happening. In this issue of Science, put together with the help of many but especially senior editor Ruth Kulstad, a series of articles defines the enormity of the problem, making clear that any solution will demand scientific know-how, stark realism, and compassionate judgment.

The articles by Fauci, Price et al., and Curran et al. establish some immediate boundaries. First, a long period of virus incubation before visible signs of the disease appear severely complicates efforts to contain the epidemic. The serious mental disturbances that arise in many cases add to the difficulties of coping with the disease. While the search for a cure goes on, the spread of the epidemic may be controlled to some extent by legal and educational approaches. The difficulty of educational persuasion is highlighted by Fineberg. Although education may already have convinced many of the groups at greatest risk of the facts, the drastic changes in behavior needed to modify statistics significantly have not occurred. Changing from 50 sexual partners to monogamy affects the probability of infection dramatically, but switching to five partners produces only marginal changes in risk. Drug users learn about the dangers of sharing needles but continue to share them. Knowledge does not guarantee motivation to change in the face of powerful biological

The international aspects of the disease, reviewed by Piot et al., deserve attention, because they throw light on the relation between different patterns of behavior and infection in different countries. For example, in Africa, heterosexual activity is the dominant mode of transmission whereas homosexual and drug-related activities continue to be important in transmission of the disease in the United States.

Legal and ethical problems that must be confronted are discussed by Dickens and by Walters. For instance, should testing be mandatory? Some emphatically say "No." But what is a hospital to do if a surgical patient refuses testing? There are obligations to employees as well as to patients. Should confidentiality be preserved at any cost? What is the responsibility of a physician in informing spouses and children, to say nothing of others who might become infected?

The incredible expense of existing AIDS cases and those predicted for the near future (estimated at \$22 billion for the United States by Bloom and Carliner in a conservative analysis) will certainly exacerbate the emotions of the debate. Is it the responsibility of society to pay the medical costs of those who are warned yet continue dangerous practices? Who is responsible for children who have contracted AIDS? For those who contract it from contaminated blood, who should be held responsible financially—hospitals, insurance companies, the government? Can they sue?

The legal difficulties outlined by Dickens clearly show that an internally consistent plan has yet to be achieved in any country. Some Iron Curtain countries make it a crime for an infected individual to have intercourse without informing the partner. Other societies are reluctant to put any limits on groups which they feel are already suffering opprobrium for unconventional behavior.

An impressive feature of this collection of articles is how much one compartmentalized subject requires information from another. Thus, the promise of an educational campaign is shown to be inevitably intertwined with the scientific and legal aspects of the disease. The legal aspects are certainly intertwined with the expense of treating the disease and the political clout of the parties affected. Ethical solutions appropriate for one group may be totally inappropriate for another. The staggering expense of AIDS is sure to conflict with monetary demands for other social programs.

In a recent issue of Science (22 January, p. 375) the history of the syphilis epidemic was recounted. Many decisions made then, no doubt expedient at the time, do not appear justified today. Decisions today have to be made on the shifting sand of public emotion, if not hysteria, and changing scientific facts. Perhaps the question, "How will we look to future generations?" may be the best test for evaluating our current attitudes and decisions.

—Daniel E. Koshland, Jr.

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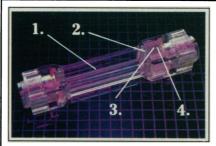
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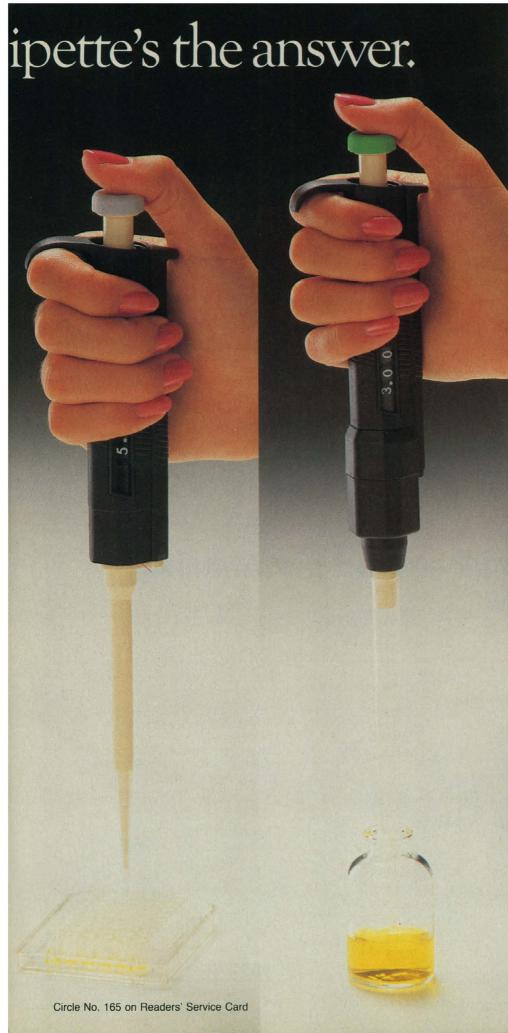
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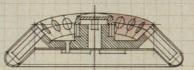
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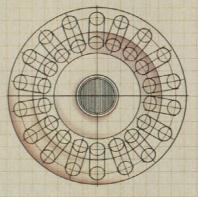
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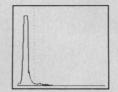
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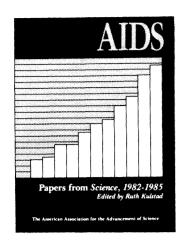
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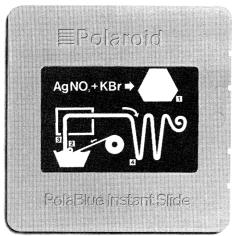
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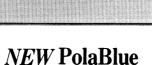
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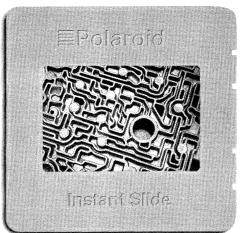
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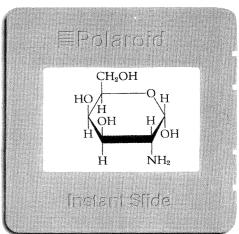
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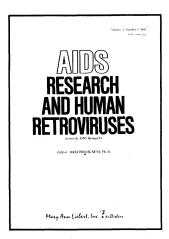
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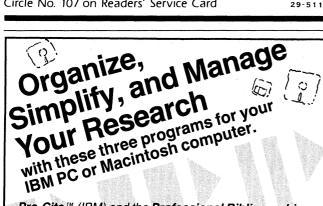


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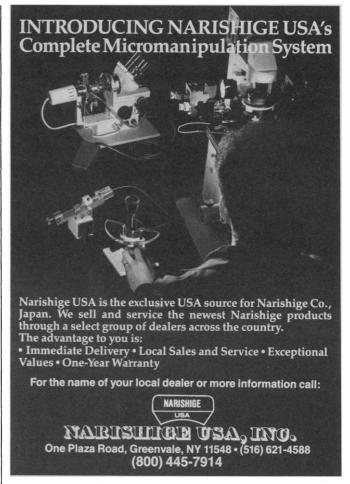
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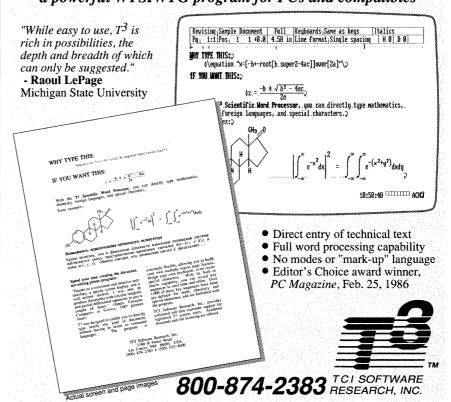
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