

says Galasso. In a letter to the wildlife service, NIH director James Wyngaarden warns that reclassification could "significantly compromise our current ability to make selective use of chimpanzees in research to fight human disease."

Officials at NIH suspect that there may be more chimpanzees in Africa than the conservationists want to admit. They are particularly interested in so-called "urban chimpanzees," or animals kept as pets or impounded by governments which confiscate them from poachers and monkey smugglers.

"The day may come when there may be a need for more chimpanzees," says Galasso. To get numbers of its own, NIH wants to fund a survey of chimp populations in Equatorial Africa. But the project is being blocked by the conservationists.

"I'm very suspicious of any survey where they know what they want to find before they start. It's bad science," says Susan Lieberman of the Humane Society.

Lieberman views the survey as "a delay tactic." For his part, Galasso says he would hope the wildlife service would wait until the NIH survey is finished before they consider reclassifying the chimpanzee. The survey could take 4 years.

In any case, no announcement requesting the survey has been released. "It's in limbo until the chimpanzee politics comes to a head," says William Gay of the Division of Research Resources at NIH, who adds that he has been "writing and rewriting" the proposal since April.

In interviews, NIH officials complain that they are being portrayed by the conservation community as monsters who are prepared to pluck baby chimps from their mother's arms in Africa and bring them to the United States, where they would be loaded up with the AIDS virus. Says Gay: "We thought we were being helpful . . . but the rewards for trying to be helpful are limited at this point."

Yet NIH must take some of the blame for its bad public relations. Indeed, an early draft of the proposal to do the chimp survey mentions the possibility of working in Africa "where the use of chimpanzees remains relatively unrestricted." The document also refers to wild populations as "valuable renewable resources" that "provide a last resort reserve of animals that may be judiciously drawn upon to renew captive breeding programs." If NIH officials believed that someone like Goodall would not oppose such a plan, they were living in dreamland.

The whole affair is left up to the federal wildlife service. If the chimpanzee is reclassified as "endangered," the exemptions that allow for biomedical research will be revoked. Interstate commerce, even the ship-

ping of blood samples, would require a permit. Says Richard Robinson of the wildlife service: "It's safe to say it would make life much more complicated for folks using chimps for biomedical research."

The wildlife service might not even be able to issue permits to scientists to do any medical experiments on chimpanzees. The Endangered Species Act is very specific about what kind of exemptions it allows.

If a permit is given, the scientific research must directly benefit the endangered species itself, says Robinson. No matter how broadly the laws are interpreted, injecting animals with AIDS vaccines would not fall under the heading of "benefits."

There is a way around the quagmire. Wildlife service officials mentioned the fact that the service could upgrade the wild populations of chimpanzees to an endangered listing, while leaving the captive populations at their current level of threatened. This population by population approach is not uncommon. The wolf, for example, is listed as endangered in all of the lower 48 states, except in Minnesota, where it is only listed as threatened. And wolves in Alaska are not listed at all. In a similar situation,

Nile crocodiles that live on government farms in Zimbabwe were downlisted to threatened, while their fellow crocs in the wild remained endangered.

Currently about 950 chimps reside in facilities supported by the government. Of these, 350 have been put aside for breeding. Many of the remaining chimps were used during the development of a hepatitis vaccine, and some of these can be used to test promising AIDS vaccines and antiviral drugs. Whether there will be enough chimps is unknown. A lot will depend on the candidate vaccines and on how the chimps now infected with the AIDS virus fare. At present, researchers do not believe that infected chimpanzees will succumb to AIDS.

What will happen if biomedical researchers desperately plead for more animals? Frederick King of the Yerkes Primate Research Center at Emory University in Atlanta believes "species loyalty" may come into effect. "When the pandemic of AIDS becomes a truly frightening thing, humans will not stand by and watch their own species reduced while they protect animals that could help test vaccines and drugs. . . . It's not a very popular thing to say, but I think it's true." ■ WILLIAM BOOTH

AIDS Report Draws Tepid Response

President Reagan responded last week with a hem and a haw to the recommendations of his own AIDS advisory commission.

Reagan called for several studies, a couple of conferences, and one expeditious review. He directed all federal agencies to follow antidiscrimination policies that are already largely in place. Most of Reagan's "10 Point Plan" was not very pointed.

"We didn't give the President the report he wanted so he sent it off for more study," said Frank Lilly, a member of the commission and chairman of the genetics department at Albert Einstein College of Medicine in New York. Lilly said he was disappointed but not really surprised by Reagan's tepid response.

Instead of calling for legislation to outlaw discrimination against people infected with the AIDS virus, Reagan directed his Attorney General to expeditiously review how the federal government could encourage nondiscrimination. A presidential order or legislation to confront discrimination was central to the President's AIDS commission report (*Science*, 10 June, p. 1395).

Also central to the commission's recommendations was a plea to spend \$1.5 billion a year for 10 years to stem the AIDS epidemic among the nation's 1.1 million

intravenous drug users. Reagan responded with a call for bipartisan efforts to enact his various antidrug proposals.

The President did, however, order the Food and Drug Administration to immediately improve techniques to screen for the AIDS virus and to tell everyone who has received a blood transfusion since 1977 to get tested.

The reaction from critics of the Reagan Administration was predictably harsh. "They missed an opportunity to undue 7 years of neglect," said Jeffrey Levi of the National Gay and Lesbian Task Force in Washington. "They punted to the next administration."

However, AIDS commission member Beny Primm of the Addiction Research and Treatment Corporation in New York was more generous. "I don't see what else the man could have done. He's not God. This is only a beginning. . . . For a lame duck that appeals to conservatives to do this much, it's a blessing."

The chairman of the AIDS commission, retired Admiral James Watkins, who was largely responsible for shaping the report, called the President's reaction to his recommendations "an important first step."

■ WILLIAM BOOTH