

## A five-year retrospective

To the community:

I have found myself so pleased with *Just Out* that I feel moved to share some of my own personal reflections concerning the paper, having been involved with it from the beginning in the fall of 1983.

I have vivid memories of a couple of conversations I had with Renee LaChance and Jay Brown during their involvement with *The Cascade Voice*, the leading voice of the gay community at that time. They shared with me some of the frustration they were experiencing with the paper's focus and its inability to represent the diversity of Portland's lesbian and gay community. The *Voice* appeared to be directed at the gay white male bar scene, and not only did it seem to neglect the diversity of the lesbian and gay community, but it was also instrumental in perpetuating attitudes that were totally unacceptable to many lesbians and people of color.

Renee and Jay approached me with the idea of starting a new lesbian and gay publication. I had had a somewhat dismal association with the *Northwest Fountain* (one of Oregon's first gay publications), had done some work for the *Voice* and was working for *Willamette Week* full time. The idea sounded like a pipe dream, but I suggested to them that, if they were serious, I wanted to be in on the ground level. I felt as a graphic designer that there was no reason a lesbian and gay publication could not be designed to compete with other Oregon publications. We never dared to think of it as competing with nationwide publications.

I soon forgot about our conversation . . . until a couple of weeks later when Renee and Jay appeared and said, "Well, Rupe . . . we've gotten office space, some writers, some advertising, a printer and a printing date. Let's do it!" Needless to say I was a bit bowled over with how far their determination had gotten them, but I also came to realize that, in a manner of speaking, they had called my bluff. With a lot of work we pulled it together and the publication with which I feel the most attachment was born — with the fabulous Dyketones gracing its first cover.

It is fascinating for me to look back on the paper's history. It started out biweekly, became monthly, sold for a short period of time for 25 cents and has undergone a format change or two to attempt to make it easier to read. As I look back on the paper's rather humble, if not stylish, beginnings, I am impressed by the increased amount of advertising. Without the dubious benefit of often tasteless sex ads (on which a number of gay publications have to depend for their existence), *Just Out* has gone from a low of 12 pages to a high of 40 pages. I feel that the survival of the paper has been due largely to Renee and Jay's insistence that *Just Out* never be bigger than its ad line allows.

*Just Out* has featured articles on the closets of marriage, unlearning racism, alcoholism during holidays, issues of aging, the handicapped, gay youth, military homophobia, and homosexuality in Russia, thus fulfilling the commitment to the acknowledgment of our community's diversity.

As *Just Out* enters its 6th year there is no doubt that there is always room for improvement. I feel that it could try much harder for an equal balance of men's news and women's news. But I just want to let the lesbian and gay community of Portland know that it has a publication it can be proud of. I'd like to wish my friends Jay, Renee, E. Ann Hinds, Marvin Moore, Eleanor Malin and all the others associated with *Just Out* continued success during the coming year. I continue to be proud to be a part of your masthead!

Rupert Kinnard  
San Francisco

## More opinions on AZT

To the Editor:

October's article, "Prescription for homicide: Gays, AZT and mind control," had several misconceptions. Overall, I believe it conveys the impression that AZT (zidovudine, or Retrovir) is a dangerous drug that no one should take. Because of this article I'm afraid that people who might benefit from it might not give adequate consideration before making an informed decision about it. That's why I'm writing.

To begin with, I am a lesbian and a senior research nurse data manager who oversees clinical cancer research at five of the largest Portland-area hospitals.

### Misconceptions:

1. AZT is bad because it was originally developed as an anti-cancer agent and was dropped because of toxicities.

*Response:* It's true about its development, but it's not the first drug that was shelved and reintroduced for a new purpose. That sort of thing does happen and it's not necessarily bad.

2. AZT is "too" toxic.

*Response:* Yes, AZT can have severe side effects. But just about every effective chemotherapeutic agent does, especially myelosuppression [depression of the bone marrow]. A current slogan in cancer treatment is "Dose to the max," that is, give the maximum amount of drug that the patient can tolerate for maximum benefit. AZT is not unique in its side effects and does not deserve to be singled out. I think some people in the gay community are myopic on this matter. Dealing with drug toxicities is fairly routine in cancer treatment. This doesn't happen just to gay men.

3. Burroughs-Wellcome is bad because they are greedy.

*Response:* This company is no better or worse than the other drug companies. They're all in it for the money. That's the basic idea with big business in America. I'm not saying it's right or that I support it. But it doesn't make sense to single out one company and blame it for the system.

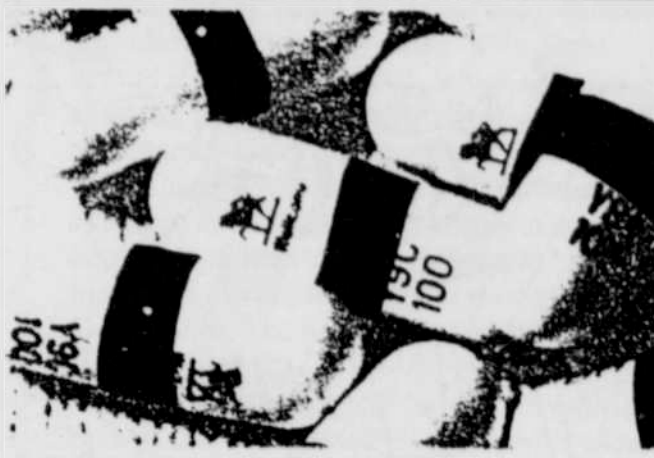
4. AZT is bad because you have to take it every four hours.

*Response:* It's interesting that a few years ago people were upset about patients not getting enough pain medication. The popular idea got to be that people needed pain pills regularly and not just "as needed." In the past I have awakened cancer patients to take pain pills every four hours. Then it wasn't considered torture — it was considered merciful. What has changed is the drug formulation. And I'm sure that eventually this will change with AZT, allowing for more time between doses.

If a drug has a potential benefit you have to weigh it against the potential disadvantages and risks. I have a friend who is on AZT now, and he doesn't take the middle-of-the-night dose. He says his sleep is more important to him. He knows that his blood levels will be lower and the drug may be less effective, but he's made his choice. I can't fault him for being "non-compliant." It's his decision, which is how it should be.

Now if my friend were to decide not to take AZT, that's OK, too. I just want to be sure that he had current and accurate information and that he had good communication with his doctor about the benefits and risks for his particular situation.

Running an article that is inflammatory and that mixes tragic stories with misconceptions will not be of great benefit to someone who is



trying to decide for him or herself about AZT. I think we deserve better information from *Just Out*.

Betty Lostheart-Hale, RN  
Portland

To the Editor:

As a PWA it was with a mixture of disgust and disbelief that I read Ian Young's article, "Prescription for Homicide." That *Just Out* would publish a poorly researched, biased and paranoia-filled article on AZT does a disservice to the people living with AIDS who are fighting for their lives.

While it is true that early studies were flawed, possibly due to a rush to get the drug on the market, recent studies in the United States and Europe (*Treatment Issues*, Vol. 2, Nos. 5 and 6) have shown that AZT does have a marked impact on survival rates. As with all medicine, including aspirin, there are some serious side effects to some people. Some patients suffer anemia, swelling of the joints and other minor symptoms, however, these have been shown to diminish with a reduced dose of AZT.

It is naive to assume that any company is going to design a drug just to cure people. The reality is that a company must make an adequate income to be able to survive. It is an unfortunate reality that AZT is an expensive drug. I can hardly imagine any recent product or service that doesn't start out at a marginally high price and then slowly come down in price. Research and development of new medicines costs a lot of money. Lack of adequate research and a rush to get a new drug on the market along with the politics is not unlike the early development of a polio vaccine.

As to the white or black box, many doctors offer the choice to get up for the 4 am dose or to ignore it. If it wasn't for the box I would not be able to remember when to take my AZT. It is a comfort when I go to a movie and hear the insistent beep of the box go off in the evening among the crowd of moviegoers; I know other PWAs are there.

There is enough evil in the world without inventing more. So many of us go kicking and screaming towards death. I witness PWAs who approach their passing, inventing angry condemnations and governmental plots, searching desperately for a cause with a quick cure.

In summation, Young's article lacks a report of the most recent literature. He provides a biased article lacking any interview or quotes with those whom he condemns. But worse, he offers no alternative to a reader whose choices are limited at best.

Ron Hodgins  
Portland

*Editor's note:* We believe that informed decisions cannot be made without discussion of divergent views. We also believe that healthy gay men are consenting to AZT treatment ignorant of the toxicity of the drug.

Two long and detailed analyses of the AZT trials and of Burroughs-Wellcome were published by *The New York Native* in the past year ("AZT on Trial," Issue 258, October 19, 1987; and "AZT: Iatrogenic Genocide," Issue 258, March 28, 1988). Extensive footnotes are included in both articles, which are available from the author, John Lauritsen, 26 St. Marks Place, New York, NY 10003. Please include a self-addressed envelope with 45 cents postage.

## Bravo U.S. West

To the Editor:

Including sexual orientation in a corporate nondiscrimination policy shows enlightenment and progressiveness. Taking a strong public stand against a ballot measure that threatens homosexual rights demonstrates commitment and courage.

As employees of U.S. West Communications (formerly Pacific Northwest Bell), we want to publicly thank our employer for continuing support in the fight against Measure 8. We express particular appreciation to Mrs. Marsha Congdon, vice-president and chief executive officer for U.S. West—Oregon.

U.S. West Communications will no doubt take some heat from supporters of Measure 8. We ask you to join us in combating the sting of this negative response. Please write a note of support and send it to Mrs. Marsha Congdon, U.S. West Communications, PO Box 3881, Portland, OR 97251. You may also choose to enclose a note when paying your next telephone bill.

We sign this as proud employees and members of EAGLE, the Employees Association for Gays and Lesbians.

John McReynolds  
Sue Salmon  
Gary L. West  
Michael Leonard

## CAP director responds to PWA's charges

To the Editor:

A letter from Patrick Landels in last month's *Just Out* leveled a number of charges against Cascade AIDS Project and its charitable trust, The Brinker Fund.

We were saddened to learn of Patrick's death this past month and extend our deep sympathies to all who loved him. The issues that he raised are meaningful and deserve a response.

Patrick stated he was told that the Brinker Fund has money available to people with AIDS for counseling, "no questions asked." Unfortunately, he was misinformed. CAP does have an arrangement with Phoenix Rising to subsidize up to eight counseling sessions for a maximum of five clients at a time, using money from the Brinker Fund. This subsidy is offered to people with AIDS/ARC who are clients of CAP and who are experiencing the greatest emotional and financial need. In order to determine eligibility and need, questions are asked. However, CAP does not use any Brinker funds to pay administrative costs.

Whether intended or not, Patrick's letter gives the impression that he was unable to secure counseling services through CAP. Had he contacted CAP, someone would have made every effort to get him the counseling he said he needed. It's truly regrettable that he believed whoever it was who misinformed him.

It is also regrettable, if not irresponsible, that *Just Out* chose to print Patrick's letter without giving CAP an opportunity to respond in the same issue. The community hardly benefits from having in circulation for a full month the angry letter of a man who was sadly misinformed about crucial services for people with AIDS.

Thomas Koberstein  
Executive director  
Cascade AIDS Project