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## just news

### New expanded access to drug Foscarnet

**A**n important new drug called Foscarnet is now available to PWAs with herpes or failing vision resulting from the virus CMV. Foscarnet is supplied by the manufacturer Astra Pharmaceuticals of Westborough, Massachusetts free of charge.

To qualify for the drug, PWAs with failing vision must have first tried the drug Ganciclovir. If Ganciclovir causes serious side effects or if it doesn't stop the progression toward blindness, Foscarnet is available. PWAs with herpes must first try the standard treatment with the drug Acyclovir. However, a small number of PWAs develop a strain of herpes that is resistant to Acyclovir, but is stopped by **JEFFREY ZURLINDEN** Foscarnet.

The federal Food and Drug Administration has not yet fully approved Foscarnet, but research studies have shown that the drug is safe enough for an expanded access program involving any physician who treats PWAs. Foscarnet must be requested by a physician, and the drug manufacturer, Astra Pharmaceuticals, determines who is eligible on a case-by-case basis.

carinii pneumonia. After four weeks of receiving 1,500 mg. of AZT daily, half of the PWAs reduced their daily dose to only 600 mg.

Eighteen months later, 52 percent of the PWAs taking the higher dose were still alive, and 63 percent of the PWAs taking the lower dose were still alive. Two years later, 27 percent of the high-dose group and 34 percent of the low-dose group were still alive. Fewer PWAs taking the low dose of AZT developed anemia or low white blood cell counts. Although this kind of research study is time consuming, it's considered the gold standard to prove that AZT can prolong the lives of PWAs.

A much shorter study of people with ARC tested AZT at even lower doses. The subjects received one of three doses — 1,500 mg., 600 mg., or 300 mg. Half also received Acyclovir, a drug used to treat herpes infections but also thought to boost AZT's ability to combat HIV. After 12 weeks, the people taking the lowest dose of AZT gained the most weight and had the greatest jump in helper T-cells. Acyclovir had no effect. This study is not as convincing as the first study because it involved very few people and it did not last long enough to measure how long people lived while taking different doses of AZT. But it will spark more interest in testing even lower doses of AZT.

Based on preliminary results of the ACTG study, the FDA last spring reduced the daily dose of AZT to 600 mg. In March, a NIH-sponsored state-of-the-art conference on AZT therapy for early HIV infection recommended that anyone with fewer than 500 helper T-cells take AZT.

### Lesbians with AIDS

**I**n the first summary of lesbians with AIDS, the Centers for Disease Control reported that from 1980 to 1989 a total of 79 women had sexual relations exclusively with other women. During that same period, the number of women with AIDS was 9,717. Most of the lesbians with AIDS, 95 percent, also used IV drugs. According to the report that appeared in the November issue of the *American Journal of Public Health*, "Prevention of HIV infection in the lesbian community will require efforts to prevent and reduce IV-drug use — the major and most direct means of transmission in this population."

### Lower doses of AZT effective

**L**ow doses of AZT work as well to slow HIV and cause fewer side effects. According to two separate studies reported in the October 11 issue of the *New England Journal of Medicine*, people with AIDS live longer and develop fewer side effects when they take less, not more AZT.

The first study, conducted by the AIDS Clinical Trials Group, enrolled over 500 people with AIDS after their first bout with pneumocystis

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