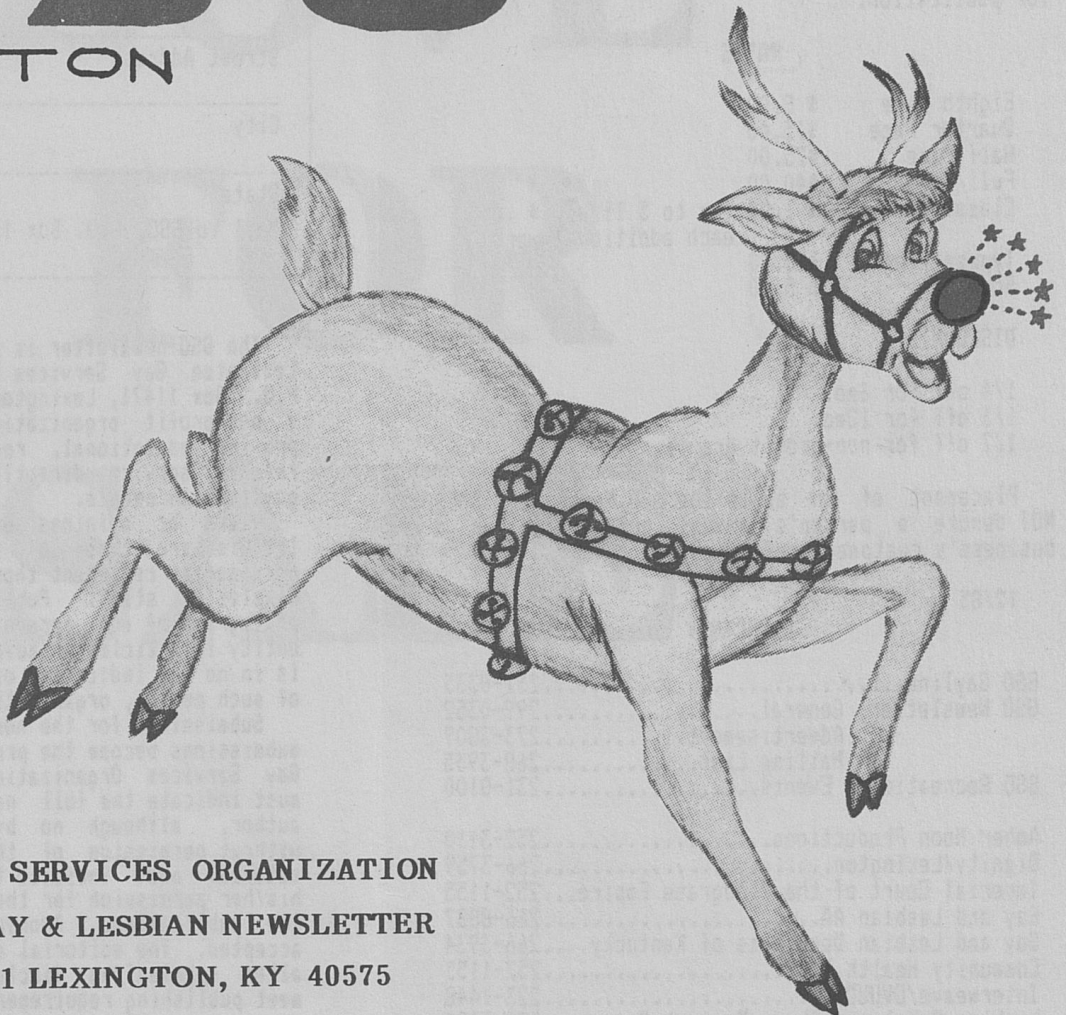


# HAPPY HOLIDAYS

from

**G S S**  
LEXINGTON



LEXINGTON GAY SERVICES ORGANIZATION

LEXINGTON'S GAY & LESBIAN NEWSLETTER

P.O. BOX 11471 LEXINGTON, KY 40575

231-0335

December 1985

NEWSLETTER ADVERTISING  
POLICY

If you would like to advertise in the GSO Newsletter, please send your camera-ready ad copy to GSO, PO Box 11471, Lexington, Ky. 40575. The Deadline for ad submission is the 15th of each month. Any ads received after the deadline will not be guaranteed to be published in that issue.

Ads may be submitted camera-ready or rough. Rough copies are subject to additional charges as shown in rates section below. GSO will not be responsible for typesetting errors in ad after printing; advertiser is responsible for proofing the ads they submit for publication.

The editor reserves the right to censor advertisements which are deemed in poor taste and to edit due to space and/or grammatical errors. Erotica, fantasy, or sexually explicit materials, or ads with sexual innuendo, will not be accepted for publication.

RATES

Eighth Page	\$ 8.00
Quarter Page	\$15.00
Half Page	\$25.00
Full Page	\$40.00
Classified	\$ 1.00 (up to 5 lines, \$ .05 each additional word)
Typesetting	\$10.00
Screens	\$ 5.00

DISCOUNTS:

- 1/4 off for 6mo.
- 1/3 off for 12mo.
- 1/2 off for non-profit groups.

Placement of an ad in the GSO Newsletter DOES NOT denote a person's sexual orientation or a business's customer preference.

12/85

DIRECTORY

GSO Gayline.....	231-0335
GSO Newsletter, General.....	299-0352
Advertisement.....	273-3809
Mailing List.....	268-3935
GSO Recreational Events.....	231-0100
Amber Moon Productions.....	252-3110
Dignity/Lexington.....	266-3759
Imperial Court of the Bluegrass Empire...	252-1155
Gay and Lesbian AA.....	266-8887
Gay and Lesbian Democrats of Kentucky...	266-3934
Community Health Trust.....	252-1155
Interweave/OVUUD.....	223-1448
Lesbian Substance Abuse Support Group...	252-5487
Louisville Crisis Hotline.....	(502) 637-4342
Owensboro Gay Alliance.....	(502) 685-5246
Cincinnati Gay Switchboard.....	(513) 221-7800
National Gay Task Force Crisis Line(800)	221-7044
NGTF AIDS Crisis Line.....	(800) 221-7044

GSO MEMBERSHIP/NEWSLETTER APPLICATION

-----  
Please put me/us on the GSO mailing list including a free subscription to the monthly GSO newsletter (delivered in an "unmarked" envelope).  
-----  
Enclosed is \$10.00 (or \$5.00 for students) for each membership in GSO.  
-----  
Please let me/us know how I/we can be more involved in GSO or other gay/lesbian organizations by calling \_\_\_\_\_  
-----  
or writing: Phone # \_\_\_\_\_

-----  
Name(s) \_\_\_\_\_

-----  
Street Address \_\_\_\_\_

Apt # \_\_\_\_\_

-----  
City \_\_\_\_\_

-----  
State \_\_\_\_\_

Zip \_\_\_\_\_

-----  
Mail to GSO, P.O. Box 11471, Lex., KY 40575  
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The GSO newsletter is published monthly by the Lexington Gay Services Organization Incorporated, P.O. Box 11471, Lexington, Kentucky 40575. GSO is a non-profit organization whose purpose is to provide educational, recreational, social and referral services directly involving or relating to gay/lesbian people.

Views or opinions expressed in stories or letters are those of the writers and do not necessarily represent those of the GSO board or the newsletter staff. Publication of the name or photograph of any person, organization or other entity in articles or advertising in the newsletter is in no way indicative of the sexual orientation of such person, organization or entity.

Submissions for the newsletter are welcome. All submissions become the property of the Lexington Gay Services Organization, Inc. All Submissions must indicate the full name and address of the author, although no byline will be published without permission of the author. Non-original material must indicate that that person has given his/her permission for the use of his/her name in the publication. Anonymous submissions cannot be accepted. The editorial staff has the right to alter submissions (including advertisements) to meet publishing requirements.



GSO CHRISTMAS DANCE  
AT BREWERY  
WEDNESDAY

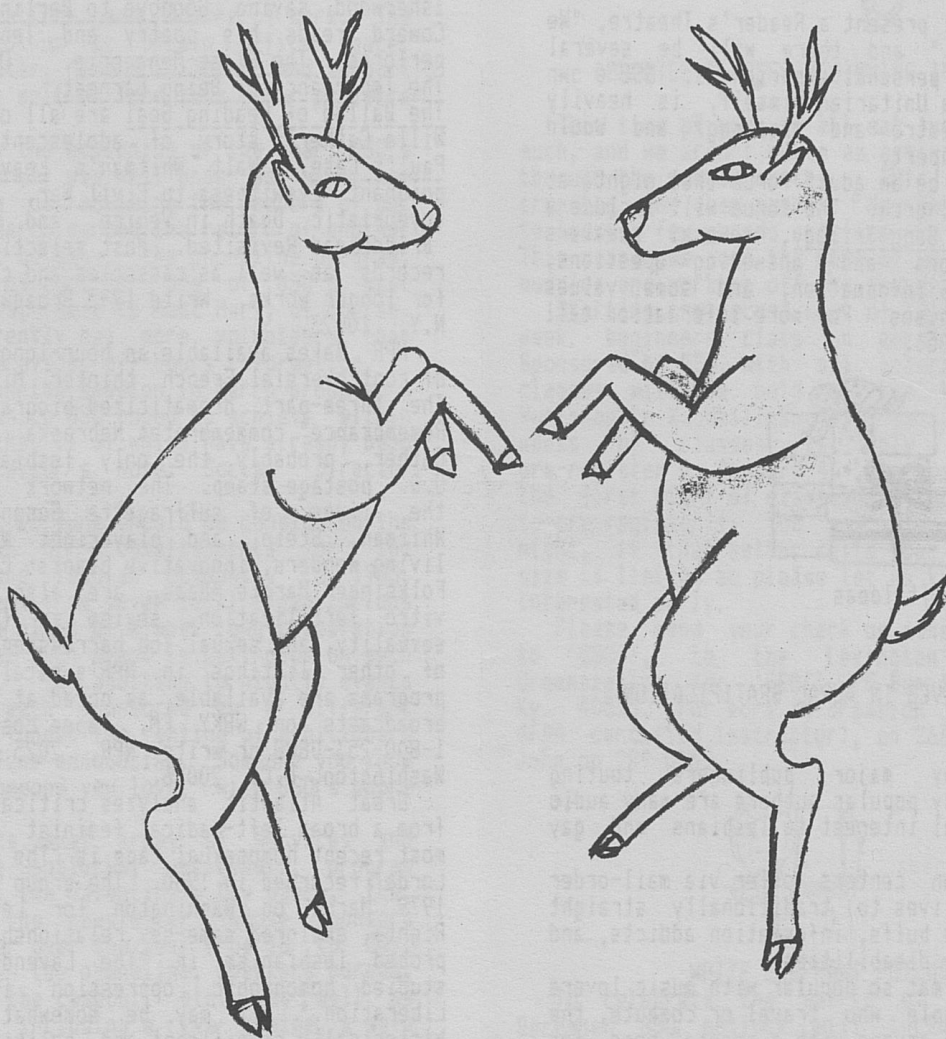
# LOVE FOR SALE

Fur N' Feathers  
2909 Richmond Road  
Lexington, Kentucky 40509  
566-0226



**Fur N' Feathers**  
**2909 Richmond Road**  
**Lexington, Kentucky 40509**  
**266-0226**

GSO CHRISTMAS DANCE PARTY  
ΔΤ BREZINGS  
WEDNESDAY DEC 18  
2<sup>00</sup> COVER



The \$2.00 cover is a donation to GSO.  
Thanks for your support!!



### INTERWEAVE SUNDAY

On Sunday, December 8th at 10:45 AM, Interweave/Lexington will present the Sunday worship service at the Unitarian Universalist Church.

Interweave will present a Reader's Theatre, "We Are Your Children," and there will be several speakers sharing personal experiences. GSO's own program director, a Unitarian himself, is heavily involved (in theatre and speaking) and would appreciate your support.

There will also be an adult forum that night at 7:00, also at the Church. The forum will include a cutting from Torch Song Trilogy, several speakers leading discussions and answering questions, women's music, AIDS information, and some values clarification exercises. For more information call Keith K. at 273-8056.



Gift Ideas

### SOUND ALTERNATIVES IN AURAL GRATIFICATION By John Zeh

Overshadowed by major publishers touting "talking books" by popular authors are many audio cassettes of special interest to lesbians and gay men.

Three production centers offer via mail-order some sound alternatives to traditionally straight fare for literature buffs, information addicts, and people with reading disabilities.

The cassette format so popular with music lovers is ideal for people who travel or commute, the visually impaired - anyone with a special need for aural companionship. Audio tapes offer easy access to homosexual culture and information for study groups, anyone with poor reading skills, and those who want to embellish time-wasting routines with learning. As well, the titles are important historic relics for collectors of gay artifacts, and they may help stimulate interest in print versions overlooked or ignored.

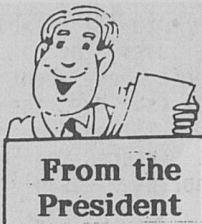
Long a colorful resource for educators, Caedmon now offers the public many choice recordings of authors, poets, and playwrights reading their own works, in addition to volumes of older classics brought alive in studio readings and live performances. National Public Radio sells only a few definitely gay-related titles but offers other important, relevant public affairs programs worth hearing and discussing. Great Atlantic Radio Conspiracy distributes copies of its powerful productions, a handful of which deal with homophile issues.

Caedmon captured the actual voices of Jean Genet reading The Thief's Journal, Gertrude Stein sending A Valentine to Sherwood Anderson, and Christopher Isherwood saying Goodbye to Berlin. Sir Noel Coward reads his poetry and Tennessee Williams performs The Glass Menagerie. Oscar Wilde's The Importance of Being Earnest, The Ballad of Reading Goal are all on tape. So are Willa Cather's story of adolescent rebellion in Paul's Case. Walt Whitman's Leaves of Grass and poignant Eyewitness to Civil War, Thomas Mann's voyeuristic Death in Venice, and Evelyn Waugh's Brideshead Revisited. Most selections are on LP records as well as cassettes and cost \$9-13, more for longer works. Write 1995 Broadway, New York, N.Y. 10023.

NPR makes available an hour-long sound portrait of controversial French thinker Michel Foucault. The three-part dramatized biography, "A Look of Remembrance" commemorates Nebraska novelist Willa Cather, probably the only lesbian featured on a U.S. postage stamp. The network also documents the lives of suffragette Susan B. Anthony, Whitman, Stein, and playwright Williams. Two living wonders, innovative pianist Cecil Taylor and folksinger Margie Adams, are also featured. In vitro fertilization, sexism in films, myths of sexuality, and sexual job harassment are examples of other listings in NPR's catalog. Many newer programs are available, as noted at the end of NPR broadcasts on WBKY FM. Tapes cost \$10-11. Call 1-800-253-0808 or write NPR, 2025 M St. N.W., Washington, D.C. 20036.

Great Atlantic analyzes critical social issues from a broad left-radical feminist perspective. Its most recent homosexual tape is "The Poetry of Audre Lorde" recorded in 1980. The group documented the 1979 March on Washington for Lesbian and Gay Rights, explored same-sex relationships in "Love," probed lesbianism in "The Lavender Menace," and studied homophobic oppression in "Gay Male Liberation." All may be somewhat dated, but are historically significant and politically correct. Singer Hooly Near and Bisexual Quaker activist George Lakey are featured in two other programs. The Conspiracy's syndicated shows tackle such timely topics as nuclear radiation, pornography, as a feminist issue, Central American conflicts, the new right, and changing men's roles. A list of recent tapes is free; the complete catalog costs \$1 from 2743 Maryland Ave., Baltimore, MD 21218. Each

**MIS-PAGINATION**



From the President

GSO: THE YEAR IN REVIEW

Nineteen Eighty Five should be remembered as a year of progress for Lexington Gay Services Organization. Things started rolling early in the year when we announced in January that we had been awarded a grant from the Chicago Resource Center after two applications and months of work. The grant has enabled us to obtain office space, purchase a computer, rent a billboard and support gay pride week, as well as fund many other projects and events.

Of course, by the beginning of the year, GSO's favorite aunt, (Mary), was well under way with her new-found calling of advising the readers of our newsletter. And March marked the return of another source of comfort to many - the phoneline program, something many of us consider one of GSO's most important services, next to Aunt Mary, of course. The phoneline currently has more volunteers than ever before, and provides off-hours information.

A day long planning session in March produced a list of 12 goals which GSO hoped to achieve within the next 12 months, 11 of which have already been accomplished. (Editor's Note: Social Director needed!).

Gay Pride Week in June should be considered the gem in the crown of accomplishments for the Lexington gay and lesbian community in 1985. Dedicated volunteers from seven local organizations contributed to the plans of a week long celebration of pride, the first such event in Lexington on such a massive scale. In addition to nightly events during the week, each sponsored by a different organization, GSO funded the renting of a billboard for the month of June announcing, "Someone you know is gay...maybe someone you love," with GSO's phone number.

The year had its usual array of services and events including potlucks, volleyball, program meetings, bowling, the Valentine's Day dance, the Show Auction, the newsletter (whose sponsors increased in number over the year from 18 to 30), cards and games, the phoneline, speakers bureau, the Derby Brunch, the campout, etc., as well as some new events including a river cruise, a safe sex seminar and a speaker on AIDS. We made the "Whispers" video (the story of a teenager in the process of coming out), available to counselors and church groups and got it aired on Lexington's Telecable channel.

A final thanks to all those too numerous to mention who helped make this year a success. I am especially thankful to the Board of GSO for their support through the year. They have done a

fantastic job and should be proud of this list of accomplishments.

Happy holidays from myself and the GSO Board, we hope to have your continued support in 1986. GSO - BE A PART OF IT!

J.D. Wiechers  
J.D. Wiechers  
President, GSO

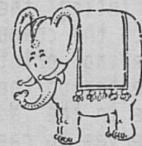


AEROBICS CLASSES BEGINNING IN JANUARY

This time of year we all eat just a little too much, and we aren't quite as active as we have been through the summer months. This tends to show, creating the ever popular "New Year's Resolution", to loose a few pounds and firm up those muscles. This year come join the rest of us exercising those muscles and working off the pounds.

Starting the second week of January another 6 week beginners class in aerobics will begin. Sponsored by GSO, with all others welcome. The classes will be held at the Woodhill Workout Workshop in Woodhill Shopping Center. The entire 6 weeks of classes is only \$25.00, if you pre-register by January 4. The cost is \$30.00 on the first night of classes (obviously an incentive to pre-register!). You may also pay \$3.00 per night, if that better suits your schedule. Class size is limited so please let us know if you are interested early.

Please send your check or money order (payable to 'GSO'), to the Lexington Gay Services Organization (or 'GSO'), PO Box 11471, Lexington, Ky. 40575. For more information call Bob (your AFAA certified instructor), on 266-9083 or Jim and John on 299-0352.



WHITE ELEPHANT POTLUCK

To celebrate the spirit of Christmas, the December GSO potluck will include a gag gift exchange. We urge you to find a gift around the house, but if you have to buy one, please limit the price to \$3.

Everyone is welcome. The potluck will be at Michael and Bruce's on Sunday, December 8th at 1:30pm. For directions or other information call 299-0352.







### ASK AUNT MARY

Confidential to Terrified at Transy: Think long and hard before you make any decisions you may regret for the rest of your life. The following recently appeared in Ann Lander's column (author unknown) and should give you something to ponder:

#### THE DILEMMA

- To laugh is to risk appearing a fool.
- To weep is to risk appearing sentimental.
- To reach out for another is to risk involvement.
- To expose feelings is to risk rejection.
- To place your dreams before the crowd is to risk ridicule.
- To love is to risk not being loved in return.
- To go forward in the face of overwhelming odds is to risk failure.

But risks must be taken because the greatest hazard in life is to risk nothing. The person who risks nothing does nothing, has nothing, is nothing. He may avoid suffering and sorrow, but he cannot learn, feel, change, grow or love. Chained by his certitudes, he is a slave. He has forfeited his freedom. Only a person who takes risks is free.

Good luck.  
Aunt Mary

Dear Readers: Thanks to all of you who have sent me cards and letters over the past year, your friendship and support have meant so much to me. Since I will be out of town over the holidays, my column will not appear in the January issue of the Newsletter, but will return in February. Till then, have a joyous holiday season!

Aunt Mary

If you would like to write to Aunt Mary, send your letter to: Aunt Mary, %6SD, Post Office Box 11471, Lexington, Kentucky 40575. All names are kept strictly confidential. If you wish a personal reply, please include a stamped, self addressed envelope.

### ORDER RESTORED IN THE UNIVERSE



Rumor has it (unconfirmed by this writer) that Patsy Cline can once again be heard at the Bungalow! One of the current selections is Sweet Dreams, and the other will remain a pleasant surprise. Oh, its nearly enough to restore one's faith. Now if only the good Lord, in his infinite wisdom would choose to do permanent damage to the record in the number 100 slot, I might be persuaded to re-examine my thoughts on the virgin birth.

## Letters to the editor

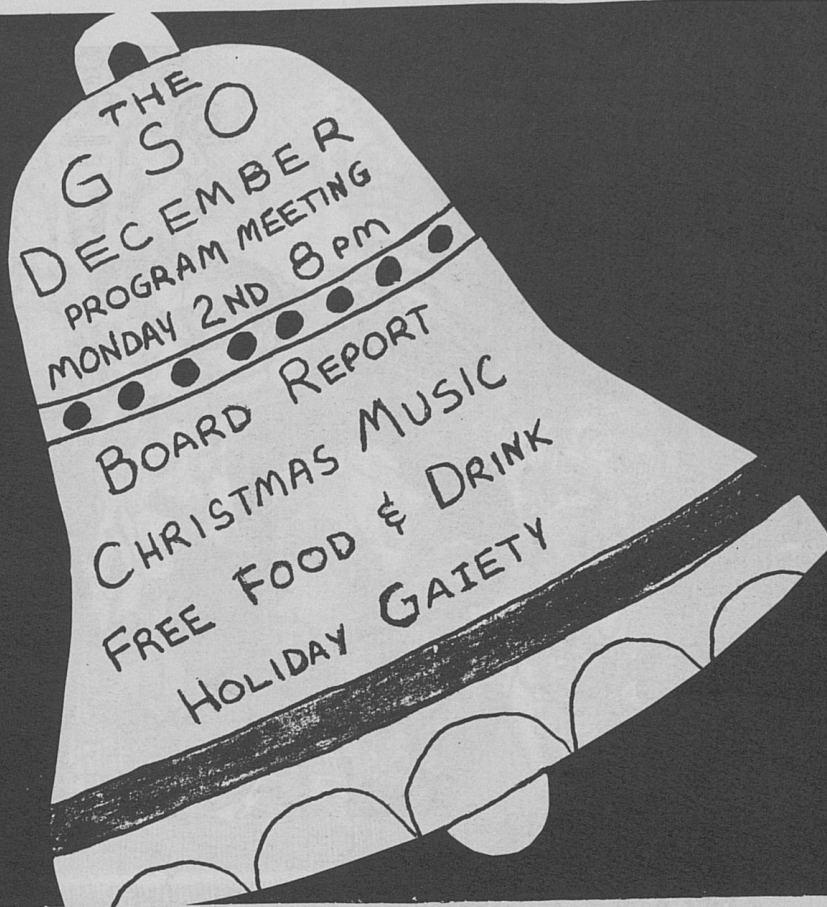
### LETTERS TO THE EDITOR

Dear 6SD Editor: I am writing you about your articles on the immune system which appear in the last two issues. I commend you and your staff for printing this valuable information; the more we know about this wretched killer, the better off we'll be. That you are printing these sorts of articles certainly benefits the community you wish to serve; however, your having printed a fairly large ad for the Cinema theatre on the last page of the "Immune System" article in the November issue is in poor taste, and serves to cast doubts upon your true understanding of AIDS and the issues surrounding it. The Cinema advertisement concerns "All Male Adult Films" and tries to drum up business for their Sunday and Monday night screenings; in particular, this ad wants us to tell our friends about "Preppy Summer." By now, it is fairly common knowledge that AIDS can be acquired through the transfer of bodily fluids, with blood and mucus being the chief among these fluids. Although "All Male Adult Films" may not all depict the exchange and transfer of bodily fluids, I don't think it unwise of me to assume that most, including "Preppy Summer," do. If you, and all of

those many organizations across this country that are concerned about arresting the spread of AIDS, were really concerned about the disease's mortality rate, you would not print advertisements which try to sell us a view of what could possibly be the actual spreading of AIDS among males. Are we to listen to your warnings, and then watch these movies in which these warnings are openly disregarded? Or, are we to watch these movies, vicariously experiencing these - we are warned - taboo and deadly sexual practices, never thinking that in the process of making these movies these actors could be contracting AIDS?

It is sad for us all that AIDS is spreading, yet it is no less lamentable that editors of leading gay publications, like yourself, are ostensibly decrying AIDS and the many issues surrounding it, but actually are helping to encourage the spread of it. Your Newsletter Advertising Policy indicates that "Erotica, fantasy, or sexually explicit materials, or ads with sexual innuendo, will not be accepted for publication." I strongly suggest that you add the following to these guidelines: "or which ultimately condone the spread of Acquired Immune Deficiency Syndrome."

B.W.B. - Lexington



half-hour show is \$5, or two for \$9 on the same cassette.

The next time some homophobe puts you down for flaunting lesbian or gay pride and questions our role in society, tell him to stick one of these tapes in his ear.

John Zeh, a University of Kentucky graduate, listens to tapes at Orient Correctional Institute, where he is a library clerk.

**COURT ACCEPTS CASE THAT WOULD AFFECT  
ANTI-SODOMY LAWS**  
from Knight-Rider News Service

Washington - The Supreme Court agreed yesterday to decide an issue of major importance to the gay rights movement - whether private homosexual acts between consenting adults are protected by the constitutional right of privacy.

At stake is the validity of laws in about half the states that make it a crime to commit sodomy. Gay rights leaders say that such statutes make criminals of millions of homosexuals and are used to justify discrimination against them in such fields as employment, housing and child custody.

Tom Stoddard, an American Civil Liberties Union lawyer, said that the case to be reviewed by the high court involved not simply a gay rights issue but an issue of sexual privacy in general.

"It will help to determine the contours of the constitutional right of privacy."

The Supreme Court justices rarely deal with such sensitive questions. They have not issued a written opinion on gay rights since they concluded in 1967 that an alien found to be a homosexual could be deported as a person with a "psychopathic personality."

Last year they tried to tackle a unique Oklahoma law that barred public school teachers from advocating homosexual conduct. But the outcome was a 4-4 tie, no written opinions and no nationally binding precedent.

Now the high court has accepted for decision by July a constitutional test of Georgia's anti-sodomy statute, which makes it a crime to participate in "any sexual act involving the sex organs of one person and the mouth or anus of another."

Michael Hardwick was arrested in 1982 when a police officer saw him engaging in a homosexual act through a partly open bedroom door in his apartment.

Hardwick challenged the constitutionality of the sodomy statute and won an unprecedented 2-1 ruling from the Atlanta-based federal appeals court.

Circuit Judge Frank M. Johnson wrote for the appeals court that states could not interfere with private sexual acts between consenting adults unless they could show a compelling need to do so.

In appealing Johnson's ruling, the Georgia attorney general's office argued that sodomy statutes had been embodied in U.S. laws since the American Revolution and that a right to engage in sodomy was never contemplated by the Constitution.



# BREZING'S

PIANO LOUNGE  
234 EAST SHORT DANCING FROM 10:30

*Specials*  
(MONDAY & TUESDAY)  
HAPPY HOUR ALL NIGHT  
(WED. CHAMPAGNE SPECIAL)  
BELLE'S THIRSTY THURSDAYS  
ALL WELL DRINKS ONLY .75¢

FRI. & SAT.  
ARE ALWAYS HOT  
BELLE'S \$2.00 COVER  
INCLUDES YOUR  
FIRST DRINK!

J. Davis '34

## THE IMMUNE SYSTEM: PART III

### Immunity - Natural and Acquired

As long ago as the fifth century B.C., Greek physicians noted that people who had recovered from the plague would never get it again - they had acquired immunity. This is because, whenever T cells and B cells are activated some subsets become "memory" cells. Then, the next time that an individual encounters that same antigen, the immune system is primed to destroy it.

The degree of immunity depends on the kind of antigen, its amount, and how it enters the body.

Infants are born with relatively weak immune responses. They have, however, natural immunity, protected during the first months of life by means of antibodies they receive from their mothers. The antibody IgG, which travels across the placenta, makes them immune to the same microbes their mothers are immune to. Children who are nursed also receive IgA antibodies from breast milk.

In addition to acquiring immunity naturally, it is possible to become immunized through the use of vaccines. Vaccines contain microorganisms, or parts of microorganisms, that have been altered so that they will produce an immune response but not full-blown disease. Some vaccines are made from microbes that have been changed slightly (attenuated) so they can no longer produce infection. They may, for instance, be unable to multiply. Some vaccines are made from a live virus that has been weakened by growing it for many cycles in animals or tissue cultures.

Recent research has focused on developing vaccines that use only part of the infectious agent. Such subunit vaccines - which are now available for meningitis and pneumonia - produce the desired immunity without stirring up separate immune reactions to the many antigens carried, for instance, on a single bacterium.

### Disorders of The Immune System

#### Allergy

The most common types of allergic reactions - hay fever, some kinds of asthma, and hives - are produced when the immune system responds to a false alarm. In a susceptible person, a normally harmless substance - grass pollen or house dust, for example - is perceived as a threat and is attacked.

Such allergic reactions are related to the antibody known as immunoglobulin E. Like other antibodies, each IgE antibody is specific: one reacts against oak pollen, another against ragweed antigens. The role of IgE in the natural order of things is not known, although some scientists suspect that it developed as a defense against infection by parasitic worms.

When allergic persons are first exposed to an antigen or allergen, they make large amounts of the corresponding antibody. These IgE molecules attach to the surfaces of mast cells (in tissue) or basophils (in the circulation).

When this IgE antibody signals the mast cell or basophil to release the powerful chemicals inside it. It is these chemical mediators that cause the symptoms of allergy, including wheezing, sneezing, runny eyes, and itching.

### Immune Deficiency Diseases

Lack of one or more components of the immune system results in an immune deficiency disease. These can be inherited, acquired through illness, or produced as an inadvertent side effect of certain drug treatments.

In the early 1980's doctors became aware of a growing number of cases of an often fatal disorder named the acquired immune deficiency syndrome (AIDS). Nearly 95 percent of AIDS cases have been found among sexually active homosexual and bisexual men with multiple sex partners, Haitian entrants into the United States, present or past abusers of intravenous drugs, persons with hemophilia, and the children of persons in these categories.

Characterized by very low levels of helper T cells, but normal levels of suppressor T cells, AIDS is thought to be caused by a transmissible agent, perhaps a virus. AIDS can lead to an otherwise rare tumor known as Kaposi's sarcoma and a variety of opportunistic infections including an unusual form of pneumonia caused by *Pneumocystis carinii*. Opportunistic infections are those produced by organisms that do not affect people whose immune systems are working normally. No adequate treatment for AIDS has yet been found.

### Frontiers in Immunology

Molecular genetics is the study of gene structure. By plucking interesting genes from their cells or origin and reinserting them into bacterial cells, scientists can obtain and analyze quantities of genes, including the genes involved in immune response.

Among other advances, this area of research has provided valuable insights into the ways that antibodies work - insights that will help us understand the inappropriate antibody responses that occur in autoimmune diseases. Some day this technology may be used to correct gene defects. Other potential uses include making prenatal diagnosis, developing vaccines, and correcting defective lymphocytes.

### Immunoregulation

Research into the delicate and complex checks and balances that regulate the immune response is leading not only to an appreciation of the events involved in normal immunity, but also to abnormalities of immune functions. Eventually it may be possible to treat diseases such as systemic lupus erythematosus by selectively suppressing parts of the immune system that are overactive and selectively stimulating those that are underactive.

### Hybrid Cells

Through a finesse known as hybridoma technology, scientists are now able to obtain, in quantity, substances secreted by cells of the immune system.

# ADOPT A PET...



## PETS HAVE PRIDE TOO

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PETS DONT HAVE A CHOICE LIKE US  
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HAVE A CHOICE !

FOR ONLY 25<sup>00</sup> YOU CAN  
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A DOG OR PUPPY, INCLUDING  
VET. CHECK, DEWORMING,  
DOG LICENCE, RABIES SHOT  
SPAY OR NEUTERING.

*Please Call*

**WOODFORD HUMANE SOCIETY** 255-1140

Dee Friess · Dot Casey · Nancy Victor

ways in which AIDS might be transmitted can be hypothesized and not disproved. For example, suppose a child who had AIDS got into a schoolyard fight with one who did not, and they cut each other enough to bleed profusely. The uninfected child might get AIDS only if blood from the AIDS victim entered his body through a cut, which is unlikely but not impossible. As an extra precaution, some health authorities recommend that AIDS children who might or are incontinent be kept out of school, though urine, like saliva, has not been known to spread AIDS. Even the obvious injunction to avoid intercourse with an AIDS victim is not easy to follow. Up to a million Americans are thought to have been exposed to the virus, and the vast majority do not themselves know who they are; many may not develop symptoms for six years or so. Indeed, it is widely believed that people who harbor the AIDS virus are most likely to infect others before, not after, they exhibit obvious symptoms.

Even so, the known facts, while hardly comforting, provide no basis for hysteria. AIDS is not wildly contagious: a large portion, possibly even a majority, of the people who have been exposed to the disease will never get it. At highest risk are the most sexually active homosexual men. For people who do not come into close sexual contact with them, Stephen Schultz, assistant commissioner of the New York City health department, offers this moderately comforting summation: "AIDS is not an easy disease to come by. It is hard to get."



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Please send me  
THE COMPLETE GAY-LESBIAN & FEMINIST CATALOG  
(Please PRINT) 1701-12/85 Enclosed is \$1.

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ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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Detroit, Michigan 48205

PLEASE INCLUDE THE ABOVE COUPON WHEN ORDERING.  
GSO WILL RECEIVE \$1 FOR EACH COUPON RETURNED.

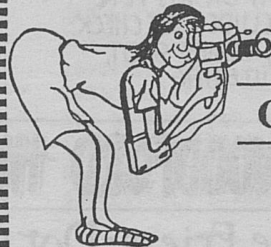
GSO

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- Cafe' LMNOP
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- Cinema
- Creative Video
- David C. Radez, FSC Securities Corp.
- Dignity/Lexington
- \* Fur'N Feathers
- Galore Productions
- Green Earth Landscaping Company
- \* Images
- Imperial Court of the Bluegrass Empire
- Ishmael and Co. Salon
- Jester's
- Joe Bologna's
- June McGinnis, Realtor Associate
- \* Keith Buchanan, Trendsetters
- Kentucky Theatre
- Kyohva Record Pool
- Landscape Originals Inc.
- \* Leather Works
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- \* Marque Cross Productions
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- The Bungalow
- Unitarian Universalist Church
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\* Ask about DISCOUNTS for GSO members!!



**CREATIVE VIDEO**

Weddings • Living Wills •  
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Sporting Events

Cathleen Otvos

266-9698

# Merry Christmas

And  
**HAPPY NEW YEAR**

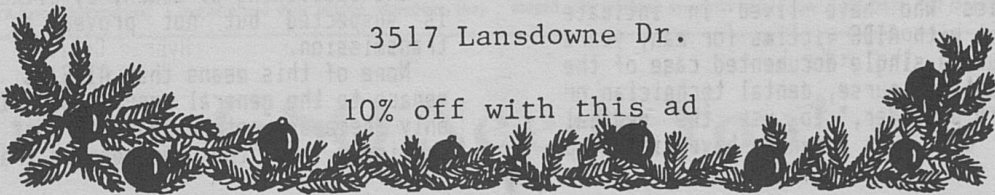
from  
**IMAGES**  
**HAIR DESIGN**



**Create Your Own Unique Image**  
**273-2301**

3517 Lansdowne Dr.

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A "hybridoma" is created by fusing two cells, a secreting cell from the immune system and a long-lived cancer cell, within a single membrane. The resulting hybrid cell can be cloned, producing many identical offspring. Each of these daughter clones will secrete, over a long period of time, the immune cell product - antibody if a B cell was used, a lymphokine if a T cell was used. Because the secretions trace their origins to a single cell, they are pure, and in the case of antibodies, they recognize a single, specific antigen.

Cell hybridization holds enormous potential in the prevention, diagnosis, and treatment of disease. Antibodies produced by a hybridoma, which are called monoclonal antibodies, have been used to distinguish among different types of lymphomas and leukemias, permitting physicians to tailor therapy accordingly. They are being used to determine the ratio of helper T cells and suppressor T cells in immune disorders. They may also make it possible to develop totally specific immunoglobulins that can be used in vaccines to protect people against diseases like influenza.

#### FOR ALL ITS FEROCITY, AIDS IS RELATIVELY HARD TO GET

from Time

The public anxiety, even hysteria, touched off by AIDS is understandable, if lamentable. The disease was identified just over four years ago, and much about the ways in which it spreads remains obscure. No one knows, for example, why it strikes women and men in about equal numbers in Central Africa, where the disease appears to have originated, while in the U.S. only 7% of the 13,000 victims identified so far have been women. There are theories but no proof. Nonetheless, a review of the facts establishes that public fears are vastly overblown. The ways in which AIDS is known to have been transmitted in the U.S. are few.

The AIDS virus, designated HTLV-III/LAV, has been detected in four bodily fluids: semen, blood, saliva and tears. But it has been found in saliva and tears only in small amounts, and not a single case of transmission by those fluids has been documented. Doctors cannot prove that this will never happen, but nearly all known cases involve contact with the semen or blood of an AIDS victim. Quite direct contact too: the virus can live only a very short time outside the human body. It does not linger on doorknobs, clothing, food, dishes, glasses, utensils or toilet seats.

Thus there has been no known case of infection by so-called casual contact: being in the same room with an AIDS victim, sharing a meal or a bathroom, being sneezed on, even hugging and social kissing. Members of families who have lived in intimate non-sexual contact with AIDS victims for many years have yet to produce a single documented case of the disease. No doctor, nurse, dental technician or other "health-care provider," to use the medical jargon, in the U.S. is known to have picked up

AIDS from a patient. (A nurse in Britain who contracted the disease was accidentally pricked with a contaminated needle.) In fact, there are only four ways in which the disease is known to be transmitted:

1) By transfusions of blood or blood products. Only 1% of American men and 10% of women with AIDS were infected in this way, and the numbers are likely to dwindle. All blood donated for transfusion is now being subjected to a test to detect exposure to the virus.

2) By sharing of needles among people who inject drugs into their bodies intravenously. An AIDS victim passes a needle to another drug abuser who uses it immediately; blood on the needle enters the second narcotics user's vein. Some 14% of the men and 53% of the much smaller number of women who have contracted AIDS in the U.S. got it this way.

3) By childbirth. A baby can be infected with AIDS in the womb or during birth, probably from the mother's blood. The number of cases so far is very small, about 130 (some 180 children in the U.S. have the disease), but unhappily it is likely to increase. More parents are sure to be exposed to the virus, and a possibly large percentage, who for some unknown reason never develop symptoms, can unwittingly pass the virus to their children. (Both women and men who are not victims of AIDS can be carriers.)

4) By sexual intercourse. This is far and away the leading method of transmission, and to explain why requires being explicit; too often the mechanisms have been obscured by ambiguous phrases like "exchange of bodily fluids" that may frighten more people than they inform.

The disease can be spread by heterosexual intercourse. The primary agent of infection is semen. Women get AIDS from infected men. They do not get AIDS from other women so far as is known. Men get AIDS from women far less frequently; indeed there is some debate as to whether they do so at all. The virus can be carried by a woman's blood, but whether it is present in vaginal secretions is still subject to investigation. Blood or vaginal secretions might enter a man's body through sores or other lesions. It is not certain whether open-mouth kissing can transmit AIDS; given the small concentrations of the virus so far found in saliva, it would seem to be what scientists call an inefficient method of spreading the disease.

A heavy majority, as much as 73% of all AIDS cases in the U.S., result from homosexual intercourse between men. The most prevalent method of transmission from man to man (and possibly from man to woman) is thought to be anal intercourse, which frequently results in ruptures of the rectum, through which the semen of an infected man can enter the blood of a male or female sexual partner.

The swallowing of semen, by either women or men, is suspected but not proved to be a method of transmission.

None of this means that AIDS is not a serious menace to the general population. It surely is, if only because not enough is yet known about precisely how the syndrome is transmitted. Many



# The Unnoticed Link in AIDS Cases

By TERRY KRIEGER and CESAR A. CACERES

Almost everyone believes AIDS—Acquired Immune Deficiency Syndrome—has destroyed the immune systems of previously healthy people. But our research suggests that AIDS generally has struck people whose immune systems already were damaged. An apparent cause of such damage in many U.S. AIDS patients has been drug abuse. And although concern about AIDS is fully justified, the number of new cases, rather than doubling or tripling every year, is nearing a stable level.

AIDS is not itself a disease. Rather, it is the presence of at least one of over a dozen diseases—none of them new—and a distinctive viral infection (HTLV-III). Either the diseases or the infection may reflect a severe disorder in the body's immune system, which defends the body from disease.

On Oct. 7, the federal government's Centers for Disease Control (CDC) announced that 13,834 AIDS cases had been reported since the CDC started investigating AIDS in 1981.

A total of 82% of AIDS patients have had pneumocystis pneumonia, Kaposi's sarcoma or both. Pneumocystis pneumonia prevents the blood from receiving sufficient oxygen. Kaposi's sarcoma is a cancer of the blood vessels that often produces distinctive purple skin lesions.

### Recreational Drugs

Both pneumocystis and Kaposi's have occurred disproportionately among pa-

*AIDS patients seem to have been people who already were sick in the sense of having a damaged immune system. Apparently most were sick because they abused drugs. And, we fear, some of today's drug abusers probably will be most of tomorrow's AIDS patients.*

tients who do not have AIDS but whose immune systems were suppressed by drugs taken to treat disease (chemotherapy) or to prevent rejection of a heart or kidney transplant. AIDS-related diseases have been associated with recreational, as well as medical, drug use. In fact, there is an astonishing record of recreational drug use among AIDS patients.

The CDC reports 2,342 or 17% of AIDS patients have been intravenous drug users: They have "use[d] needles for self-injection of drugs not prescribed by a physician."

But the CDC classifies AIDS patients by "risk groups," and "... cases with multiple characteristics are tabulated only in the group listed first." Since the CDC lists intravenous drug users below homosexual

and bisexual men, it classifies AIDS patients as IV drug users only if they are exclusively heterosexual IV drug users. Yet, the CDC notes that at least 1,163 of the 10,003 homosexual and bisexual AIDS patients also have been IV drug users. If we add the 1,163 homosexual and bisexual IV drug users to the 2,342 exclusively heterosexual IV drug users, we find at least 25% of AIDS patients have been intravenous drug users.

But there is more to the relationship between AIDS and recreational drug use. Whether obtained legally or illegally, most drugs are not taken intravenously. Amphetamines ("uppers"), barbiturates ("downers"), LSD and PCP (hallucinogens) are swallowed. Cocaine is snorted. Amyl and butyl nitrites ("poppers") and ethyl chloride are sniffed. Marijuana is smoked. Yet, while the CDC collects data on intravenous drug use among all AIDS patients, it collects data on non-intravenous (or oral) drug use only among some AIDS patients in special studies.

In an analysis of 87 homosexual and bisexual AIDS patients involved in three CDC studies, Dr. Harry W. Haverkos, then of the CDC, found 97% had used oral "street drugs" at least once. Now at the National Institutes of Health (NIH), Dr. Haverkos estimates at least 75% of all 87 patients used oral street drugs at least once a week for at least several years but were not IV drug users.

If the AIDS patients in the CDC studies are representative of those classified as homosexual or bisexual men—and other studies indicate they are—at least 54% of AIDS patients have been oral drug abusers. If we add 54% to the 25% of AIDS patients classified as intravenous drug users, we find at least 79% of AIDS patients have been drug abusers.

Since drug abuse can severely damage the immune system, why has AIDS been identified primarily with sex, especially sex among homosexuals?

The CDC started to receive reports of pneumocystis pneumonia and Kaposi's sarcoma in young and middle-aged homosexual men in early 1981. Since then, the understanding of AIDS has been influenced by three common but doubtful assumptions: Most homosexuals are promiscuous, sex among homosexuals is more risky than that among heterosexuals, and homosexual sex is completely different from heterosexual sex. (Any sexual act performed by two men also can be—and often is—performed by a man and a woman.)

These three assumptions have led to the hypothesis that the key shared trait is homosexuality. Almost all AIDS researchers now agree AIDS is transmitted by sex among heterosexuals as well as homosexuals. (Most people who have contracted AIDS, whatever their sexual orientation, have led a "fast-track" life style involving sexual experimentation, promiscuity and drug abuse.) They also agree it is transmitted by the sharing of dirty needles among intravenous drug users, transfusion of contaminated blood and blood products, or intimate contact between infected mothers and their babies. Moreover, they

agree that, however transmitted, the virus HTLV-III is the cause of AIDS. They think that by itself it severely damages the immune system, thereby permitting the development of rare diseases. But is this explanation adequate?

A virus or other foreign substance that has penetrated the body may stimulate the immune system to produce blood-borne proteins called antibodies, which help the immune system identify and attack the foreign substance. Since the discovery of HTLV-III, studies have shown 68% to 100% of AIDS patients have had antibodies to HTLV-III. But other studies have indicated that 5% to 19% of people with HTLV-III antibodies have developed AIDS during follow-up periods of two to five years.

This is not as paradoxical as it may seem. The immune system often prevents

tracting AIDS-related diseases.

Approximately 335 AIDS patients have not fallen under any of the CDC's risk groups but were born in Haiti, where immune damage might be fostered by extreme poverty.

In addition, 238 people who received blood or blood-product transfusions and 106 people who have hemophilia or other coagulation disorders treated with blood products have developed AIDS. Their cases have been attributed to HTLV-III in blood and blood products they received (which is why all collected blood now is tested for HTLV-III antibodies). But these people required blood or blood products because they *already* were ill. The illnesses of those who needed transfusions may have caused (or been caused by) immune damage, and repeated transfusion of blood products itself may have caused such damage in those with hemophilia or other coagulation disorders.

Most children with AIDS evidently have suffered from a congenital deficiency that damages the immune system. Of the 191 children with AIDS, 143—that's 75%—have had a parent with AIDS or at increased risk for AIDS.

So, it appears that AIDS patients have not been healthy people who got AIDS simply because they had sex with the wrong person. Rather, they seem to have been people who already were sick in the sense of having a damaged immune system. Apparently most were sick because they abused drugs. And, we fear, some of today's drug abusers probably will be most of tomorrow's AIDS patients.

### Rate Is Slowing

One reason for the hysteria over AIDS may be that news accounts have fostered the belief that the number of new AIDS cases has grown each year (which is true), as well as the belief that the year-to-year rate of increase of new AIDS cases has risen (which is not true). In fact, the rate of increase has declined. It was 449% between 1980 and 1981, 283% between 1981 and 1982, 174% between 1982 and 1983, and 94% between 1983 and 1984. Between the first half of 1984 (when there were 2,328 new AIDS cases) and the first half of this year (when there were 3,495), the rate of increase was 50%.

So AIDS appears to be stabilizing. Indeed, an unreleased analysis of AIDS trends conducted at the CDC last year found "the composite trend for all U.S. AIDS cases" was in "a transition period that may plateau in 1985."

AIDS has been a physical calamity for individuals struck by it, a social calamity for groups identified with it and a psychological calamity for people frightened by it. But the nation's overall health probably has been endangered less by AIDS than by the pervasive drug abuse that may be a cause of it.

*Mr. Krieger is a Washington writer. Dr. Caceres is a Washington internist who has treated dozens of AIDS patients. He was chief of a medical systems development laboratory at the U.S. Public Health Service from 1960 to 1969.*

## AIDS Patients By Kind of Pre-Existing Immune Damage

	CASES	P.P.R. CENT
Drug abusers <sup>1</sup>	11,007	79%
Patients with other causes of pre-existing immune damage:		
Poor environment <sup>2</sup> (Haitians outside CDC "risk groups")	335	2
Serious illness (recipients of blood or blood product transfusions)	238	2
Repeated transfusion of blood products (hemophiliacs and people with other coagulation disorders)	106	1
Congenital deficiency (children with a parent with AIDS or at increased risk for AIDS)	143	1
Other/unknown	2,005	15
<b>TOTAL</b>	<b>13,834</b>	<b>100%</b>

<sup>1</sup>Estimate based on the Centers for Disease Control's October 7 AIDS Surveillance Report and published CDC studies.  
<sup>2</sup>Number based on a CDC estimate.

an infection—the penetration of the body by a virus or other potentially harmful organism—from causing a disease. The question is: How might the immune system of AIDS patients differ from that of other people infected by HTLV-III?

It appears that HTLV-III will produce AIDS only if the immune system is already damaged. Such pre-existing immune damage may result from congenital deficiency, repeated transfusion of blood products, serious illness, poor environment or self-destructive conduct like drug abuse.

Our estimate that 79% of AIDS patients have been drug abusers is borne out by personal experience. One of us is an internist in private practice who has reviewed the cases of 20 of his own patients who died of AIDS. All but two had habitually used oral street drugs for at least several years (and thereby apparently damaged their immune systems) before con-



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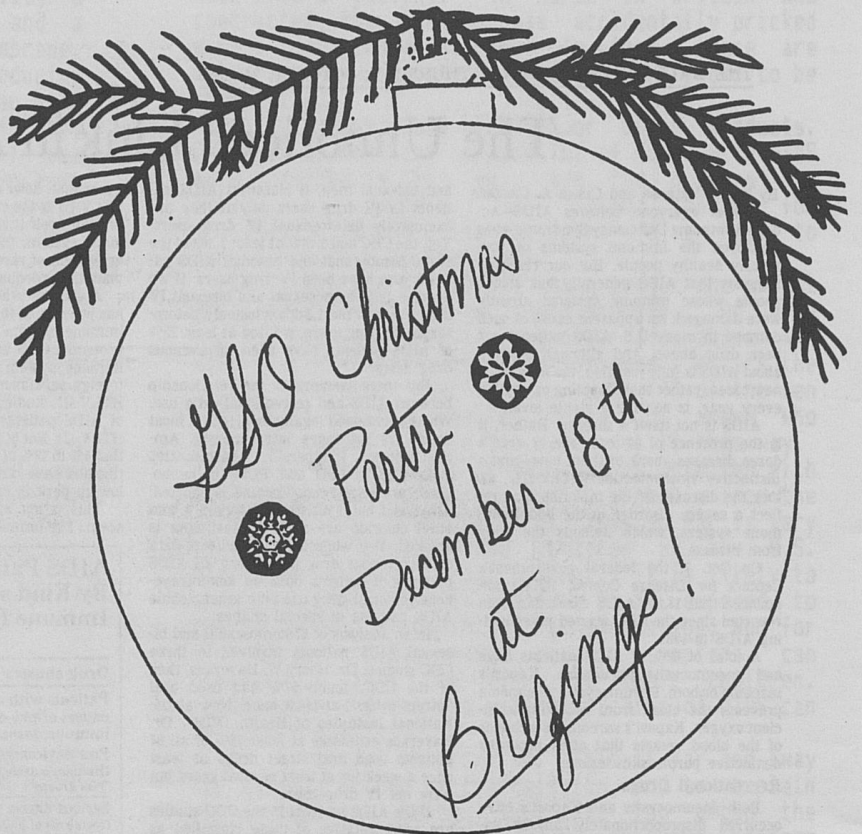
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SUN 1 GAY AND LESBIAN AA, 4:00pm, GSD office, 431 S. Broadway, Suite 322.

MON 2 GSD FORUM, 8:00pm - Board Report and Community Input, 8:30pm - Program, This month's program will be a Reader's Theatre "We Are Your Children". Following the program we will have a discussion and socializing. The social time will include Christmas music (sing - a - long encouraged), free food and drink. Come celebrate with us, the gaiety felt, this time of year. GSD office, 431 S. Broadway, Suite 322.

TUE 3 LESBIAN ALCOHOL AND SUBSTANCE ABUSE SUPPORT GROUP, 7:00pm, GSD office, 431 S. Broadway, Suite 322; GSD RAINBOW LEAGUE BOWLING, 9:00pm, Joyland Bowl.

WED 4 DIGNITY BOARD MEETING, 6:30pm, Newman Center; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; PHONELINE (231-0335), 8:00pm - 11:00pm.

THU 5 PHONELINE (231-0335), 8:00pm - 11:00pm.

FRI 6 GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center.

SUN 8 GSD POTLUCK, Bruce and Michael's, 1:30pm. This potluck will also be a White Elephant gag gift exchange. Be sure to bring a gift in addition to a dish. For more information call 299-0352 or contact any GSD member. Bring a friend too. See you there!; GAY AND LESBIAN AA, 4:00pm, GSD office, 431 S. Broadway, Suite 322; SPECIAL INTERWEAVE SUNDAY, 10:45am is the Reader's Theatre "We Are Your Children", 7:00pm is the Adult Forum, Unitarian Universalist Church.

TUE 10 LESBIAN ALCOHOL AND SUBSTANCE ABUSE SUPPORT GROUP, 7:00pm, GSD office, 431 S. Broadway, Suite 322; GSD RAINBOW LEAGUE BOWLING, 9:00pm, Joyland Bowl.

WED 11 DIGNITY LITURGY, 7:30pm, Newman Center; PHONELINE (231-0335), 8:00pm - 11:00pm.; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120.

THU 12 PHONELINE (231-0335), 8:00pm - 11:00pm.

FRI 13 GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center.

SUN 15 LESBIAN POTLUCK BRUNCH, 11:00am - 1:00pm, for more information call Cathleen, at 266-9698; PHONELINE MEETING, 2:00pm, GSD office, 431 S. Broadway, Suite 322; GAY AND LESBIAN AA, 4:00pm, GSD office, 431 S. Broadway, Suite 322.

MON 16 PROGRAM COMMITTEE PLANNING MEETING, 7:30pm, for more information call Keith K. at 273-8056.

TUE 17 LESBIAN ALCOHOL AND SUBSTANCE ABUSE SUPPORT GROUP, 7:00pm, GSD office, 431 S. Broadway, Suite 322; GSD RAINBOW LEAGUE BOWLING, 9:00pm Joyland Bowl.

WED 18 GSD CHRISTMAS DANCE PARTY, Brezings, Come on out and spend the night celebrating Christmas with your friends. All proceeds from the door will be donated to GSD; DIGNITY CHRISTMAS POTLUCK, 7:30pm, for location or more information call 254-9812, be sure to stop by the GSD dance after the potluck!; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; PHONELINE (231-0335), 8:00pm - 11:00pm.

THU 19 INTERWEAVE MEETING, 7:30, Unitarian Universalist Church, for more information call 223-1448; PHONELINE (231-0335), 8:00pm - 11:00pm.

FRI 20 GAY AND LESBIAN AA, 8:00pm Comprehensive Care Center.

SUN 22 GAY AND LESBIAN AA, 4:00pm, GSD office.

TUE 24 CHRISTMAS EVE.

WED 25 MERRY CHRISTMAS FROM GSD!!

THU 26 PHONELINE, (231-0335), 8:00pm - 11:00pm.

FRI 27 GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center.

SUN 29 GAY AND LESBIAN AA, 4:00pm, GSD office, 431 S. Broadway, Suite 322.

TUE 31 NEW YEARS' EVE.

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