

THE PLAIN DEALER

TUESDAY, NOVEMBER 23, 2004

ARTS&LIFE

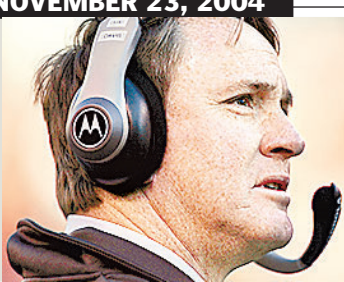
DESPERATE DIARIES

Juicy stories from local housewives

BUSINESS

TODAY'S BARBIE

At 45, it's tough to compete



SPORTS

BUTCH DAVIS' JOB IN PERIL

Browns owner ponders coach's future



BILL KENNEDY | THE PLAIN DEALER

Flanked by their attorneys, Jon Huddleston, second from the left, and Raymond Williams listen Monday as a judge sentences them to five years' probation in the shooting death of their buddy, Lorenzo Hunter.

U.S. accuses councilman in bribe plot

JOHN CANIGLIA AND MIKE TOBIN Plain Dealer Reporters

Cleveland City Councilman Joseph Jones was charged Monday with accepting bribes from two consultants in exchange for favors at City Hall.

A federal indictment says Jones, a two-term councilman from the Lee-Harvard neighborhood, sought out the businessmen in 2002 and asked for money.

Defense attorney John McCaffrey said Jones, 36, of East 177th Street, would fight the charges and continue to represent Ward 1 on City Council. Jones is up for re-election next fall.

The indictment also does not say what favors Jones is accused of providing. It also does not name the consultants, but records filed later Monday reveal that one of them is Nate Gray, a prominent political consultant and parking lot operator.

Neither Gray nor his attorney, William Beyer, could be reached for comment.

The charges tighten federal prosecutors' grip on Gray, who has been investigated for years in a wide-ranging public



JOSHUA GUNTER | THE PLAIN DEALER

Cleveland City Councilman Joseph Jones, right, leaves the federal courthouse in Cleveland on Monday with lawyer John McCaffrey.

lic corruption probe that reaches other cities, including New Orleans and Houston.

SEE JONES | A12

Teens get probation for death

Benedictine ex-players regret robbery that got friend killed, judge says

JOHN F. HAGAN Plain Dealer Reporter

Two promising high school athletes got a break Monday from a sentencing judge who placed them on five years' probation for their part in the shooting death of one of their buddies.

Raymond Williams and Jon Huddleston, both 18 and teammates on the 2003 Benedictine High School football team, faced stiff prison terms for causing the death of their friend and fellow classmate, Lorenzo Hunter, 16.

Prosecutors said the trio was trying to rob a drug dealer at East 124th Street and Craven Avenue on April 16. Lorenzo Hunter was shot four times by Rodney Roberts, 21, who was cleared by a grand jury in the shooting.

One of the boys was using a fake, but realistic-looking, handgun. The other may have had a real gun, prosecutors said at the sentencing, but it has never

"They're not as innocent as they're being made out to be."

Cheryl Tucker, mother of Lorenzo Hunter, on defendants Raymond Williams and Jon Huddleston

been located.

Cuyahoga County Common Pleas Judge Shirley Strickland Saffold said Williams and Huddleston were "extremely remorseful" and placed them on probation, providing they attend college within six months and maintain a C-average. If they violate probation, they could be sentenced to three years in prison.

Williams has completed his high

school course in Cleveland public schools but his graduation status is being reviewed by the school district. Huddleston's high school status is unclear.

"I don't believe these young men acted as adults," said Saffold at the end of a three-hour sentencing hearing. "They acted as children."

Saffold rejected prosecutors' arguments that Williams and Huddleston should receive prison sentences.

Assistant County Prosecutor Thomas Cahill said the robbery of the drug dealer was well planned. "This was cold and this was calculated," said Cahill, who implored Saffold not to place the two on probation.

Added his fellow prosecutor, Frankie Goldberg: "This was not a random act of violence. This was not child's play. This was not kids being kids. This was thrill-seeking."

SEE VERDICT | A12

Rural Wisconsin reeling over killing of 6 hunters

P.J. HUFFSTUTTER AND STEPHANIE SIMON Los Angeles Times

BIRCHWOOD, WIS. — Hundreds of people huddled in the dark town square here Monday night to memorialize six hunters — their friends and neighbors — killed in an attack so savage that few could speak of it.

It was the community's first chance to gather since a trespasser emptied his semi-automatic rifle Sunday into a group of friends out for a Thanksgiving week deer hunt.

"We have come here tonight with



Vang

many emotions," Paul Oman, pastor of the Trinity Lutheran Church, said. "Shock, certainly. Questions of why. Anger. Resentment. And the need for justice."

Some in the crowd cried. Most stared straight ahead.

Authorities arrested Chai Soua Vang, 36, as he emerged from the woods just before dusk Sunday, a short distance from the carnage.

SEE HUNTERS | A12

TEAMING UP AGAINST AIDS

Focus turns to affordable treatment

STORY BY REGINA McENERY | PLAIN DEALER REPORTER

KAMPALA, UGANDA — Until recently, manufacturers of brand-name AIDS drugs avoided testing their products in Africa because countries there were too poor to pay for them.

But now emergency AIDS dollars are beginning to flow into this continent, where an estimated 25 million people are living with HIV/AIDS. Also, the cost of anti-retroviral drugs is dropping dramatically.

The new economies have prompted Case Western Reserve University to refocus its goals and methods.

In late September, the tuberculosis research clinic that Case runs jointly with Makerere University in Kampala and the Uganda Ministry of Health began recruiting 350 patients with TB and HIV to test whether short-term combination drug therapy would slow the progression of HIV.

Dubbed the PART study — punctuated anti-retroviral therapy in HIV-as-

sociated tuberculosis — the project offers hope for patients whose faltering immune systems have left them vulnerable to life-threatening diseases such as TB but who are not sick enough to qualify for life-prolonging AIDS drugs.

Anti-retroviral therapy blocks the AIDS virus from spreading in the body.

The anti-retroviral cocktails, usually a combination of three drugs, are largely the reason AIDS mortality began plummeting eight years ago in the United States and other developed countries.

Doctors usually wait until a patient has full-blown AIDS — when a person's infection-fighting CD4 white blood cells fall below a certain level — before prescribing an AIDS cocktail. This approach makes sense in the United States, where diseases like TB are under control.

SEE AIDS | A8



VANESSA VICK | SPECIAL TO THE PLAIN DEALER

Thanks to global funds, researchers are testing new drug combinations to fight AIDS and TB.

About this series

Today: Emergency AIDS dollars changing research in Africa.

Sunday: Case Western Reserve University and Uganda launch historic partnership to research AIDS.

Yesterday: Case becomes a world leader in tuberculosis research through its collaborative clinic in Uganda.

Online: Follow the series at www.cleveland.com/ugandaaids

Powell secures Israeli help for Palestinian vote

STEVEN R. WEISMAN New York Times

JERUSALEM — Secretary of State Colin Powell said Monday that he had won a commitment from Israel to let Palestinians living in Jerusalem take part in elections in January and to ease conditions in the West Bank and Gaza so they can more easily vote there as well.

Powell also conferred with Palestinian leaders, praising them for their efforts to reform their government, work with the Israelis to plan for the elections and begin a process to draw militant groups into electoral politics.

"I'm pleased with the level of coordination and cooperation that exists between the Israeli government and the Palestinian Authority to make sure that those elections can be held," Powell said outside a Jericho election office, where he heard a report on Palestinian efforts to get 1.7 million voters to the polls.

He said this cooperation "is perhaps indicative of what can be achieved in the months ahead" as elections occur and Israel goes through with its planned withdrawal of settlers and forces from Gaza next year.

SEE POWELL | A6



INSIDE

- Dear Abby.....E2
- Classified.....F1
- Comics.....E5
- Deaths.....B6
- Editorials.....B8
- Movies.....E8
- Sports.....D1
- Television.....E6

Forget it, Mr. Pierce: Ray Pierce wants to be Cleveland's next mayor, but he isn't qualified; he should stop running right now, writes Brent Larkin. B9



Ukraine crisis: Tens of thousands of demonstrators jam downtown Kiev, denouncing Ukraine's presidential runoff election as fraudulent. A2

TEAMING UP AGAINST AIDS

TB cases in sub-Saharan Africa are rising rapidly due to HIV.

AIDS

FROM A1

Treatment becoming more affordable

But as doctors battling AIDS in Africa know, the collision of TB and HIV inflicts significant damage on a person's immune system long before the cell counts reach the trigger point for drug therapy.

Studies at the Case collaboration's clinical site in Kampala in recent years have found that deaths from TB are high in HIV-infected patients, even when the TB responds to antibiotics and their white cell counts are high. They also know that HIV replicates faster in people with TB.

The PART study could lay the groundwork for a temporary solution for patients who have HIV but whose blood counts don't qualify them for anti-retroviral therapy.

The study will evaluate whether six months of anti-retroviral therapy for TB patients will slow the progression of HIV. The study will also compare the risks and benefits of treating both diseases simultaneously.

Patients will be tracked for two years, and if their CD4 counts fall to the qualifying level, they automatically will be enrolled in the government-run programs providing lifetime access to AIDS drugs.

"If this works for TB, it might also work for HIV patients with malaria," said Dr. Henry Boom, director of Case's TB research unit. "There has always been a lot of speculation that when you get a flu or cold or an infection of some sort, you stimulate the immune system and it results in the HIV virus waking up and becoming more active."

The Bush administration has pledged \$15 billion over five years to battle AIDS. The money is primarily going to 15 countries where there are many sick and dying patients. Uganda is getting the most money from this initiative.

An additional \$3 billion is coming from the Global Fund to Fight AIDS, Tuberculosis and Malaria, a multinational pool of public money. The United States government is its top donor.

Meanwhile, the Clinton Foundation, begun by the former president, UNICEF, the Global

Fund and the World Bank this year negotiated a deal with a few generic-drug makers to buy medications for at least half the cost of brand-name products.

Most of the money will go for treatment and prevention. Another large chunk will be spent upgrading clinics and laboratories.



Irene Nambazira, 19, who has been sick with tuberculosis for seven months.

For Case's colleagues in Uganda, the advent of anti-retroviral therapy represents a turning point in the country's long battle against AIDS. Since the international AIDS collaboration with Case began 17 years ago, Ugandans have trained at Cleveland's hospitals and laboratories.

But they couldn't bring the city's world-class health-care facilities back with them, or the arsenal of new drugs that had changed AIDS from an automatic death sentence to a long-term chronic condition.

"I remember someone once said that if AIDS treatment were just a glass of water, Africa wouldn't be able to afford it. But I had always maintained it was possible," said Dr. Peter Mugenyi, a longtime Case collaborator who directs the Joint Clinical Research Centre in Kampala, the leading AIDS treatment center in Uganda. It provides drug cocktails to about 10,000 Ugandans.

Mugenyi drew international attention when he was invited to hear President Bush announce his \$15 billion emergency AIDS package during the 2002 State of the Union address. But Mugenyi made headlines later when he successfully challenged his own



Anette Mwedde and her 2-year-old nephew, Morris Senfuka, make their last visit to the rural Komaboga Health Center, where Case draws patients for some of its studies. The health center is hoping to one day begin providing antiretroviral therapy for AIDS patients.

PHOTOGRAPHS BY VANESSA VICK | SPECIAL TO THE PLAIN DEALER

government's reluctance to allow generic AIDS drugs into the country.

The annual cost for a triple-drug regimen is now as low as \$139 per patient in some developing countries. But necessary monitoring, to tip off doctors when drugs are not working, is much steeper, about \$1,200 a year.

With the cost of sophisticated lab tests out of reach for most patients in Africa, Case's virology laboratory in Uganda has created some tests that offer a more practical alternative. The tests look for genetic mutations in the blood that could signal resistance, said Dr. Eric Arts, the viro-

logist at Case who engineered the method.

Though not as precise as tests done in the United States, the approach is an easier, faster and cheaper way of monitoring patients. The cost is \$50 per test compared with about \$300 for a test to measure the amount of virus in the blood.

The high-tech lab that Arts heads has also documented the alarming patterns that can surface when anti-retroviral therapy is substandard or interrupted.

A small study of HIV-infected Ugandans found relapse rates of nearly 60 percent, primarily because they couldn't afford triple-combination therapies now standard in the United States. Some of the patients also reported going off their regimens periodically when their money ran out.

"The outcry to make AIDS drugs accessible, we all endorse that," said Dr. Robert Salata, a Case researcher who was part of Africa's first AIDS vaccine study and now studies HIV trends in women in the developing world. "But it doesn't end with the drugs getting there."

Salata, who is also chief of Case's infectious-disease unit, said clinics and laboratories have to be equipped to distribute the medications and manage the patients. "This impacts us, too, because you want to design studies that scientifically look at things that are important to them."

To reach this Plain Dealer reporter: rmccenery@plained.com, 216-999-5338

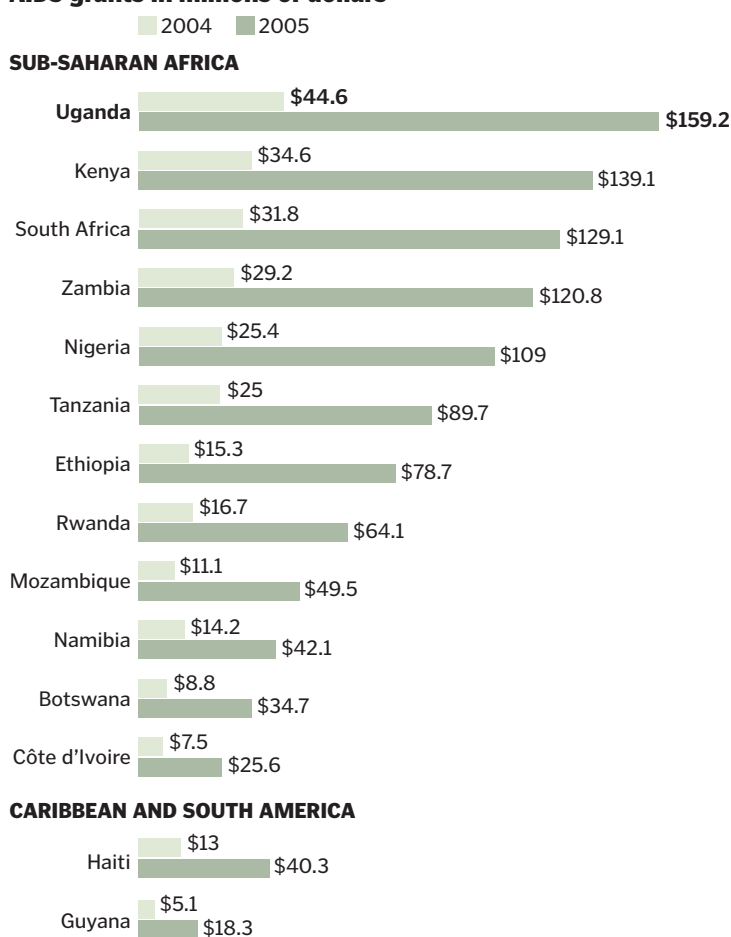


Elisha Hatanga, supervisor of the Wandegya National Tuberculosis and Leprosy Programme Laboratory in Uganda, preparing to read TB cultures. The old-world laboratory with its wooden incubator and aging equipment does the initial diagnosis on patients enrolled in Case studies.

Global AIDS initiative

President Bush's \$15 billion, five-year emergency AIDS package is beginning to trickle into 14 countries disproportionately affected by AIDS. The largest share is being spent on antiretroviral therapy that most countries cannot afford to purchase on their own.

AIDS grants in millions of dollars



NOTE: The Bush administration added Vietnam to the list but hasn't specified a dollar amount. SOURCE: Kaiser Family Foundation

Researchers study trends in HIV

Robert Salata, 52, chairman of Case Western Reserve



University's Division of Infectious Disease, is looking at whether hormonal contraceptives increase the risk of HIV in women. Was also part of the international research team that tested Africa's first AIDS vaccine. **Major areas of research:** Anti-retroviral therapy in developing countries, HIV in women, sexually transmitted disease-HIV interactions, HIV vaccines.

Eric Arts, 36, a virologist, joined the Case faculty in 1997.



He studies the molecular muscle of various HIV subtypes by engaging them in a kind of microbial boxing match. His findings bolster the argument for early treatment of HIV with anti-retroviral medications. Has been known to contact his electrician father for advice on how to fix an ailing Third World generator. **Major areas of research:** HIV fitness, HIV inhibitors, hepatitis C.



Scot Remick, 49, an oncologist, became interested in Kaposi's sarcoma, a type of cancer, when the AIDS epidemic was taking off in the United States. After joining Case in 1996, he resurrected the school's dormant interest in AIDS-related cancers in Uganda and is involved in several chemotherapy trials involving patients from Uganda and Kenya. **Major areas of research:** Kaposi's sarcoma, non-Hodgkin's lymphoma.

For more information

- "Black Death: AIDS in Africa," by anthropologist Susan Hunter.
- "Mountains Beyond Mountains," by Tracy Kidder, an account of international TB researcher Dr. Paul Farmer.
- Joint United Nations Programme on HIV/AIDS: www.UNAIDS.org
- Global Fund to Fight AIDS, Tuberculosis and Malaria: www.theglobalfund.org