A. GENERAL

At the end of the 15th century, Europeans began to be aware that there were diseases whose principal characteristic was that they are transmitted through sexual contact. For a long time these diseases were known as "venereal," from Venus, the goddess of love. More recently they have come to be termed "sexually transmitted diseases" (STDs). The homosexual aspect of STDs before the last few decades is largely unknown because of the double taboo surrounding the subject, but the AIDS crisis (XXIII.C) has thrown a glaring searchlight on the problem.

Practical guide for the lay public of 13 sexually transmitted diseases, now somewhat dated.

Two-hundred fifty-nine Danish homosexuals interviewed with regard to health; results resemble those for San Francisco in 1970.

Information and advice for gay men, now somewhat out of date. Considerable emphasis on holistic medicine, some aspects of which are controversial.

A considerably higher incidence of VD as a result of homosexual contact has probably always existed than was formerly realized, and recent years have seen a massive further increase.

This massive volume offers a truly multifaceted presentation, including social, political, and legal aspects.

4622. JUDSON, FRANKLYN N. "Comparative Prevalence Rates of Sexual Transmitted Diseases in Heterosexual and

Confirms the substantially higher homosexual rates that obtained in the late 1970s.


General survey by an M.D. for the lay reader.


Guide for the lay reader by a Professor at Harvard Medical School; see esp. pp. 42-45, 158-64.


An up-to-date survey that, without minimizing the seriousness of AIDS, shows its relative rarity.


Collection of technical papers by medical authorities.


Covers history, disease control modalities, patient education/behavior and compliance, information sources, and epidemiological and medical resources. Emphasis is on very recent material, with selected references to earlier studies. For other bibliographies see XXIII.C.


Mainly a factual account reflecting then-current knowledge, but occasionally descending to moralism regarding homosexual behavior.

4630. O'DONNELL, MARY, et al. *Lesbian Health Matters!*. Santa Cruz, CA: Santa Cruz Women's Health Collec-
Lesbian perspectives on such subjects as alternative fertilization, alcoholism, menopause, and feminist therapy.

A comprehensive professional handbook, covering medical practice, bacterially sexually transmitted diseases, enterically transmitted diseases, anal disorders, dermatological problems, AIDS, and volatile nitrates ("poppers").

4632. POLLAK, MICHAEL, and LINDINALVA LAURINDO. "1000 homosexuals test LGBTQ." Le Gai pied, no. 193 (November 15, 1985), 18-22.
Results of a questionnaire distributed by the gay weekly show that French gays are seriously concerned about the health crisis, but not panic. Some change in sexual behavior is documented, but "safe sex" has not been generally adopted. A companion article by Frank Arnel (pp. 14-15) reports on an opinion poll conducted among the French population at large, showing that they reject alarmism.

Medical report on increasing numbers of homosexual cases in East German hospitals at the time of legal reform.


Handbook on disease and health for gay men. This edition contains a special AIDS supplement ("AIDS Nachtrag").

Account by the team that successfully developed and tested a vaccine for hepatitis B, with the cooperation of the gay-male community. See also Szmuness et al., "On the Role of Sexual Behavior in the Spread of Hepatitis B Infection," Annals of Internal Medicine, 83 (1975), 489-95.
B. PROFESSIONALS AND PATIENTS

Gay men and lesbians have for long been hesitant to discuss their sexuality with health care givers, a reticence that has tended to hamper treatment. Another form of concealment— all-too-often a necessary one— is the closeted sexuality of gay and lesbian doctors and nurses.


Responses of 64 female nursing students indicated that they held more negative attitudes and stereotyped beliefs that did a sample of male counselors and psychologists. After a two-hour workshop attitudes of 37 had changed.


Inasmuch as homosexuality involves a large number of divergent experiences, the label affords little predictability. The physician should listen carefully to the patient's own statements, so as to help enhance his or her coping strategies.


Urge commitment to the social-work values of self-determination and nonjudgmental service.


The late New York City activist describes his life and medical career with asides on the experiences of others.


Health professionals need to avoid not only overt expressions of prejudice, but also procedures that prematurely foreclose the possibility of patients disclosing their sexual orientation to practitioners.


Psychiatrist relates his own difficulties in coming to terms with his homosexuality.