

Stage presence

Houston ranks second only to New York City in the number of seats for theater-goers. Our guide to what's coming to a stage near you.

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INSIDE



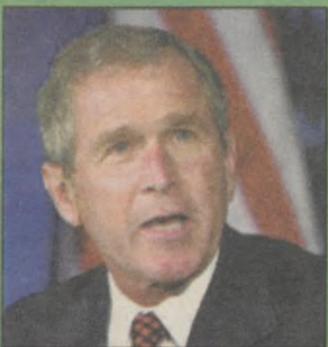
Former Major League Baseball player Billy Bean, who came out after he left baseball, will headline the upcoming Human Rights Campaign dinner in Houston.

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Calling all pink couch potatoes: Take a walk in the park with old friends thanks to a new group that starts Saturday.

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President Bush flip-flopped on the fate of the White House AIDS office, the same week sobering statistics about HIV infections were released.

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Mayor switches tack in DP debate



DALTON DEHART

Mayor Lee Brown met with nearly 100 members of the Houston gay community Saturday to discuss dropping a proposal to grant domestic partner benefits to city employees in favor of an anti-bias ban.

With backing from gay leaders, Brown drops benefits measure for sweeping anti-bias ban

by D.L. GROOVER

The placards carried by the protestors in front of Houston City Hall on Tuesday left nothing to the imagination.

"Sodomites are rejected by God," "Faggots for the fire," "Sex between two women is sodomy" and "Sodom and Gomorrah was destroyed because of sodomy" the phrases on the signs screamed.

The group had gathered to show displeasure over an impending proposal to allow city employees to include same-sex partners in the new health insurance contract being hammered out by City Council. The measure was open for public discussion at City Council's Tuesday session before the formal debate Wednesday.

This flash-point issue is a lightning rod for both Christian conservatives and gay-rights advocates. But the rhetoric during the hearing was surprisingly tame.

Only three people spoke against the "sodomite issue," as Aubrey Vaughn, pastor of Grace Baptist Church, described it in his one-minute-allotted speech; three others spoke calmly in support of the inclusion of domestic partnership benefits for gay city employees.

"I want a city with diversity and tolerance for diversity," Scott Tillinghast said. "Seven of this nation's 10 largest cities offer domestic partner benefits, as well as non-discrimination policies. Austin, Dallas, and Fort Worth have non-discrimination policies. Over 200

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Trans lobby day aims to educate, empower

by GIP PLASTER

While gay and lesbian activists solidify plans for a March Against Hate and Texas Gay Lobby Day next month, as many as 100 transgender activists are expected to take to the halls of the state capitol on Feb. 20 trying to stir up some support for their cause—a cause they say gay men and lesbians should be supporting, too.

"These issues are so interrelated, I don't think there is a way to separate them," said Sarah DePalma, executive director of the Texas Gender Information Network and organizer of the lobby day.

"We've told anybody who's anybody that they're more than welcome," she said. "We've put the hand out. It's up to them to take it."

And at least one gay group has: The

board of directors of the Houston Gay & Lesbian Political Caucus agreed to participate in the lobby day.

Longtime transgender activist Phyllis Frye said it makes sense for transgendered people and gay men and lesbians to work together, since in the eyes of many, the communities are one.

"A lot of our detractors do not differentiate between lesbians, gays, bisexuals and transgenders," she said.

The lobby day also allows a community that is often hidden in society to make its presence known in a very public way.

"It allows the legislators and their staff as well as the Capitol police and the media and other lobbyists who happen to be in the building to actually see and meet transgendered people who

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The Feb. 20 transgender lobby day will take a 'low-key' approach, without marches or protests, according to Sarah DePalma, executive director of the Texas Gender Information Network.

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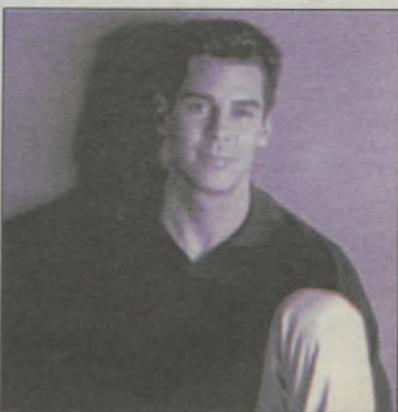
HRC gala features gay ball player, lesbian comic

Fifth annual Houston event set for March 3

by KAY DAYUS

The Human Rights Campaign's fifth annual Houston gala will be held March 3 at the Westin Galleria, emceed for the second time by lesbian comedian Georgia Ragsdale.

Billy Bean, a former major league baseball player who is one of the few profes-



Billy Bean

sional athletes to come out publicly, is slated to be the guest speaker at the affair. Bean played baseball from 1987 to 1995 with several different major league teams, leading a double life while in the league. He came out after retiring.

"I know all about the self-hatred and the shame and how hard it is to get to a point where you feel good about yourself. ...It has to come out, and it comes out as anger, sadness and depression, Bean said in a recent interview with the Advocate. Now in an open relationship with Miami restaurateur Efrain Veiga, Bean will talk about his struggles during his years in professional baseball.

Ragsdale, the first openly gay performer to sign a project development deal with a major TV studio, for a sitcom with ABC, grew up in Houston but now lives in L.A. She has appeared in hundreds of shows throughout the world and toured with her one-woman show, "Straight Up, With a Twist!"

Bret Baccus, event co-chair, promises guests a great evening. "It's more than a fundraiser; it's an event beginning when you enter the silent auction. It starts when you walk in the door. There will be a lot of energy."

Baccus said that if guests are planning a vacation, they shouldn't do it yet because there will be lots of great vacations in the silent auction, which is sponsored by the

Luxury Collection.

Sue Lovell, the state's first open lesbian appointed to the Democratic National Convention, will be on hand to receive HRC's political equality award. The community service award will go to Gary Teixeira.

The mother of African-American hate crime victim James Byrd Jr. will attend the gala for a special recognition to the Byrd family for their support of hate crimes legislation in Texas.

"Stella Byrd continues to support hates crimes legislation not only for blacks and other minorities, but for gays and lesbians," said Baccus.

The Human Rights Campaign is the largest national lesbian and gay political organization.

INFO

Houston HRC Gala

March 3, 6:30 pm
 Westin Galleria
 5060 West Alabama
 Tickets: \$125

For tickets:

800-494-8497

For information:

Bret Baccus, 713-807-7408

Houston announces five-year HIV plan

by KAY DAYUS

In an effort to stem the flow of new HIV/AIDS infections, Houston-area officials recently released a comprehensive five-year plan to address prevention and treatment of the disease.

Spearheaded by the Ryan White Planning Council and developed by private and public agencies and individuals, the plan outlines objectives to be met by specific deadlines, including coordination of funding, data collection and public awareness efforts.

Officials hope the plan provides a blueprint for decisions about service priorities and resource allocations.

The ultimate goal is to find a cure for HIV and "to stop the disease in its tracks," Harris County Judge Robert Eckels, coordinator of the plan, said at a recent press conference at the Names Project, speaking in front of a backdrop of AIDS memorial quilts. But until then, he stressed the great need for collaboration and coordination among the entities dealing with HIV/AIDS.

"When I look at these quilts, I have mixed emotions. I experience the beauty of the tapestry. Each tapestry represents the fabric of each person's life," Eckels said. "At the same time, there's a sadness there because each represents a life lost to this disease. ...We want to keep as many people off these quilts as we can."

Also in attendance was Mayor Lee Brown, who said it is essential to coordinate a comprehensive system to deal with

HIV/AIDS in prevention and treatment. "We must bring the resources of our community together to solve the problem," Brown said.

"We must talk about [HIV/AIDS] and we must talk to our children about it. We must continually get the message out," he said.

Advocates for the plan say its goals and objectives are measurable, time-phased recommendations specific to HIV prevention and care, public advocacy, outreach and to the early treatment and prevention of AIDS progression.

Although Brown declared an HIV/AIDS state of emergency in Houston's black community in December 1999, little has been done since. Activists charged that Brown was only paying lip service to the problem, but not doing anything substantial about it.

As a result of the state of emergency, Project SOUL, a peer counseling program and a task force, convened by City Council member Jew Don Boney, were started. However, neither exists any longer and the HIV/AIDS count continues to rise.

Between January 1999 and the end of June 2000, Houston/Harris County reported 2,108 new cases of HIV. Of those, a disproportionate 1,237 were among African-Americans, with 496 whites and 363 Hispanics.

What activists say is more astonishing is that of the 1,237 new HIV cases among African-Americans, 537 were black females. White females accounted for 90 cases and Hispanic women for 99.

Kathy Goode, of Goode Consulting Associates, a faith-based non-profit

HIV/STD prevention firm, said that although the plan is a good start, outreach into the black communities is of the utmost urgency to slow the rate of new infections and to get treatment to those who need it.

"The AIDS epidemic is changing colors," said Goode. "And the plan is trying to address that." AIDS is the number one killer of black men and women between the ages of 25-44. "That's before heart disease, cancer or homicide," Goode said.

Blacks also make up 61 percent of all new infections of HIV/AIDS, yet only 13 percent of the U.S. population, she said. Only 31 percent of funds for HIV/AIDS are directed at blacks.

A "phenomenon" in black society where black males refuse to accept being gay or bisexual may be to blame, Goode said. "They won't admit it because they will be called sissy; being gay is shameful to them."

Instead, "black men go out and have 'freaky' sex with usually a white gay male," Goode said. The sex is usually unprotected, "and because they are not recipients of the sex, they can tell themselves they are still macho, still male and not gay," she added.

Then they go back to their female partners and have sex with them, Goode said. The females are the unsuspecting victims; they believe their men when they tell them they have not slept with anyone else. The answer, says Goode, is "to blanket the community with this message and keep it going until they get the message."

The new plan is a good place to start the process, she said.

“ZERIT works for many of my friends. I gotta believe it can work for me. I’m positive.”

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One small capsule twice a day with or without food



Powerful enough in combination therapy to keep viral load down²⁾

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ZERIT (stavudine) in combination with other antiretroviral agents is indicated for the treatment of HIV-1 infection.

SAFETY INFORMATION:

An increase of lactic acid (lactic acidosis) in the blood, an enlarged liver and liver failure, which can cause death have been reported. Fatal lactic acidosis has occurred in pregnant women receiving the combination of didanosine and stavudine.

Fatal and non-fatal pancreatitis (inflammation of the pancreas) has occurred with ZERIT when taken in combination with didanosine and other HIV drugs.

ZERIT may cause numbness, tingling or pain in the hands or feet (neuropathy). This risk is increased in patients with advanced HIV disease or a history of neuropathy. If you are taking ZERIT in combination with other medicines that may cause similar side effects, you may have a higher chance of developing these effects.

Frequent side effects in triple combination regimens are nausea, headache, diarrhea, rash, vomiting and neuropathy. ZERIT does not cure HIV or prevent passing HIV to others. Tell your doctor if you become pregnant while taking ZERIT. ZERIT should be used during pregnancy only after discussion with your doctor.

1) IMS NPA Prescription Data 9/99 - 9/00.
2) 83% (49/59) and 49% (49/101) of patients taking ZERIT with lamivudine and indinavir had viral load undetectable at 48 weeks in an as treated and intent to treat analysis respectively. (START 1. Data on file, Bristol-Myers Squibb Company).

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Brief Summary of Prescribing Information, 12/00. For complete prescribing information, please consult official package circular.

WARNING
LACTIC ACIDOSIS AND SEVERE HEPATOMEGALY WITH STEATOSIS, INCLUDING FATAL CASES, HAVE BEEN REPORTED WITH THE USE OF NUCLEOSIDE ANALOGUES ALONE OR IN COMBINATION, INCLUDING STAVUDINE AND OTHER ANTIRETROVIRALS. FATAL LACTIC ACIDOSIS HAS BEEN REPORTED IN PREGNANT WOMEN WHO RECEIVED THE COMBINATION OF STAVUDINE AND DIDANOSINE WITH OTHER ANTIRETROVIRAL AGENTS. THE COMBINATION OF STAVUDINE AND DIDANOSINE SHOULD BE USED WITH CAUTION DURING PREGNANCY AND IS RECOMMENDED ONLY IF THE POTENTIAL BENEFIT CLEARLY OUTWEIGHS THE POTENTIAL RISK (SEE WARNINGS AND PRECAUTIONS: PREGNANCY).
FATAL AND NONFATAL PANCREATITIS HAVE OCCURRED DURING THERAPY WHEN ZERIT WAS PART OF A COMBINATION REGIMEN THAT INCLUDED DIDANOSINE, WITH OR WITHOUT HYDROXYUREA, IN BOTH TREATMENT-NAIVE AND TREATMENT-EXPERIENCED PATIENTS, REGARDLESS OF DEGREE OF IMMUNOSUPPRESSION (SEE WARNINGS).

INDICATIONS AND USAGE

ZERIT® (stavudine), in combination with other antiretroviral agents, is indicated for the treatment of HIV-1 infection (see Clinical Studies). **Clinical Studies: Combination Therapy.** The combination use of ZERIT is based on the results of clinical studies in HIV-infected patients in double- and triple-combination regimens with other antiretroviral agents. One of these studies (START 1) was a multicenter, randomized, open-label study comparing ZERIT (40 mg twice daily) plus lamivudine plus indinavir to zidovudine plus lamivudine plus indinavir in 202 treatment-naive patients. Both regimens resulted in a similar magnitude of inhibition of HIV RNA levels and increases in CD4 cell counts through 48 weeks. **Monotherapy.** The efficacy of ZERIT was demonstrated in a randomized, double-blind study (A1455-019, conducted 1992-1994) comparing ZERIT with zidovudine in 822 patients with a spectrum of HIV-related symptoms. The outcome in terms of progression of HIV disease and death was similar for both drugs.

CONTRAINDICATIONS

ZERIT is contraindicated in patients with clinically significant hypersensitivity to stavudine or to any of the components contained in the formulation.

WARNINGS

1. Lactic Acidosis/Severe Hepatomegaly with Steatosis/Hepatic Failure: Lactic acidosis and severe hepatomegaly with steatosis, including fatal cases, have been reported with the use of nucleoside analogues alone or in combination, including stavudine and other antiretrovirals. A majority of these cases have been in women. Obesity and prolonged nucleoside exposure may be risk factors. Fatal lactic acidosis has been reported in pregnant women who received the combination of stavudine and didanosine with other antiretroviral agents. The combination of stavudine and didanosine should be used with caution during pregnancy and is recommended only if the potential benefit clearly outweighs the potential risk (see PRECAUTIONS: Pregnancy). In addition, deaths attributed to hepatotoxicity have occurred in patients receiving the combination of ZERIT, didanosine, and hydroxyurea. Particular caution should be exercised when administering ZERIT to any patient with known risk factors for liver disease; however, cases have also been reported in patients with no known risk factors. Treatment with ZERIT should be suspended in any patient who develops clinical or laboratory findings suggestive of lactic acidosis or pronounced hepatotoxicity (which may include hepatomegaly and steatosis even in the absence of marked transaminase elevations). An increased risk of hepatotoxicity, which may be fatal, may occur in patients treated with ZERIT in combination with didanosine and hydroxyurea compared to when ZERIT is used alone. Patients treated with this combination should be closely monitored for signs of liver toxicity. **2. Peripheral Neuropathy:** Peripheral neuropathy, manifested by numbness, tingling, or pain in the hands or feet, has been reported in patients receiving ZERIT therapy. Peripheral neuropathy has occurred more frequently in patients with advanced HIV disease, a history of neuropathy, or concurrent neurotoxic drug therapy, including didanosine (see ADVERSE REACTIONS). **3. Pancreatitis:** Fatal and non-fatal pancreatitis have occurred during therapy when ZERIT was part of a combination regimen that included didanosine, with or without hydroxyurea, in both treatment-naive and treatment-experienced patients, regardless of degree of immunosuppression. The combination of ZERIT and didanosine (with or without hydroxyurea) and any other agents that are toxic to the pancreas should be suspended in patients with suspected pancreatitis. Reinstatement of ZERIT after a confirmed diagnosis of pancreatitis should be undertaken with particular caution and close patient monitoring. The new regimen should contain neither didanosine nor hydroxyurea.

PRECAUTIONS

Information for Patients (See Patient Information Leaflet in full prescribing information): Patients should be informed that an important toxicity of ZERIT is peripheral neuropathy. Patients should be aware that peripheral neuropathy is manifested by numbness, tingling, or pain in hands or feet, and that these symptoms should be reported to their physicians. Patients should be counseled that peripheral neuropathy occurs with greatest frequency in patients who have advanced HIV disease or a history of peripheral neuropathy, and that dose modification and/or discontinuation of ZERIT may be required if toxicity develops. Caregivers of young children receiving ZERIT therapy should be instructed regarding detection and reporting of peripheral neuropathy. Patients should be informed that when ZERIT is used in combination with other agents with similar toxicities, the incidence of adverse events may be higher than when ZERIT is used alone. An increased risk of pancreatitis, which may be fatal, may occur in patients treated with the combination of ZERIT and didanosine, with or without hydroxyurea. Patients treated with this combination should be closely monitored for symptoms of pancreatitis. An increased risk of hepatotoxicity, which may be fatal, may occur in patients treated with ZERIT in combination with didanosine and hydroxyurea. Patients treated with this combination should be closely monitored for signs of liver toxicity. Patients should be informed that ZERIT is not a cure for HIV infection, and that they may continue to acquire illnesses associated with HIV infection, including opportunistic infections. Patients should be advised to remain under the care of a physician when using ZERIT. They should be advised that ZERIT therapy has not been shown to reduce the risk of transmission of HIV to others through sexual contact or blood contamination. Patients should be informed that the long-term effects of ZERIT are unknown at this time. Patients should be informed that the Centers for Disease Control and Prevention (CDC) recommend that HIV-infected mothers not nurse newborn infants to reduce the risk of postnatal transmission of HIV infection. **Drug Interactions:** Zidovudine may competitively inhibit the intracellular phosphorylation of stavudine. Therefore, use of zidovudine in combination with ZERIT is not recommended. (See CLINICAL PHARMACOLOGY in full prescribing information.) **Carcinogenesis, Mutagenesis, Impairment of Fertility:** In 2-year carcinogenicity studies in mice and rats, stavudine was non-carcinogenic at doses which produced exposures (AUC) 39 and 168 times, respectively, human exposure at the recommended clinical dose. Benign and malignant liver tumors in mice and rats and malignant urinary bladder tumors in male rats occurred at levels of exposure 250 (mice) and 732 (rats) times human exposure at the recommended clinical dose. Stavudine was not mutagenic in the Ames *E. coli* reverse mutation, or the CHO/HGPRT mammalian cell forward gene mutation assays, with and without metabolic activation. Stavudine produced few results in the *in vitro* human lymphocyte clastogenesis and mouse fibroblast assays, and in the *in vivo* mouse micronu-

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cleus test. In the *in vitro* assays, stavudine elevated the frequency of chromosome aberrations in human lymphocytes (concentrations of 25 to 250 µg/mL, without metabolic activation) and increased the frequency of transformed foci in mouse fibroblast cells (concentrations of 25 to 2500 µg/mL, with and without metabolic activation). In the *in vivo* micronucleus assay, stavudine was clastogenic in bone marrow cells following oral stavudine administration to mice at dosages of 600 to 2000 mg/kg/day for 3 days. No evidence of impaired fertility was seen in rats with exposures (based on C_{max}) up to 216 times that observed following a clinical dosage of 1 mg/kg/day. **Pregnancy:** Pregnancy "Category C". Reproduction studies have been performed in rats and rabbits with exposures (based on C_{max}) up to 399 and 183 times, respectively, of that seen at a clinical dosage of 1 mg/kg/day and have revealed no evidence of teratogenicity. The incidence in fetuses of a common skeletal variation, unossified or incomplete ossification of sternaebra, was increased in rats at 399 times human exposure, while no effect was observed at 216 times human exposure. A slight post-implantation loss was noted at 216 times the human exposure with no effect noted at approximately 135 times the human exposure. An increase in early rat neonatal mortality (birth to 4 days of age) occurred at 399 times the human exposure, while survival of neonates was unaffected at approximately 135 times the human exposure. A study in rats showed that stavudine is transferred to the fetus through the placenta. The concentration in fetal tissue was approximately one-half the concentration in maternal plasma. Animal reproduction studies are not always predictive of human response. There are no adequate and well-controlled studies of stavudine in pregnant women. Stavudine should be used during pregnancy only if the potential benefit justifies the potential risk. Fatal lactic acidosis has been reported in pregnant women who received the combination of stavudine and didanosine with other antiretroviral agents. It is unclear if pregnancy augments the risk of lactic acidosis/hepatic steatosis syndrome reported in non-pregnant individuals receiving nucleoside analogues (see WARNINGS: Lactic Acidosis/Severe Hepatomegaly with Steatosis/Hepatic Failure). The combination of stavudine and didanosine should be used with caution during pregnancy and is recommended only if the potential benefit clearly outweighs the potential risk. Health care providers caring for HIV-infected pregnant women receiving stavudine should be alert for early diagnosis of lactic acidosis/hepatic steatosis syndrome. **Antiretroviral Pregnancy Registry:** To monitor maternal-fetal outcomes of pregnant women exposed to stavudine and other antiretroviral agents, an Antiretroviral Pregnancy Registry has been established. Physicians are encouraged to register patients by calling 1-800-258-4263. **Nursing Mothers: The Centers for Disease Control and Prevention recommend that HIV-infected mothers not breast-feed their infants to avoid risking postnatal transmission of HIV.** Studies in lactating rats demonstrated that stavudine is excreted in milk. Although it is not known whether stavudine is excreted in human milk, there exists the potential for adverse effects from stavudine in nursing infants. Because of both the potential for HIV transmission and the potential for serious adverse reactions in nursing infants, mothers should be instructed not to breast-feed if they are receiving ZERIT (stavudine). **Pediatric Use:** Use of stavudine in pediatric patients is supported by evidence from adequate and well-controlled studies of stavudine in adults with additional pharmacokinetic and safety data in pediatric patients. Adverse events that were reported to occur in 105 pediatric patients receiving ZERIT 2 mg/kg/day for a median of 6.4 months in study ACTG 240 were generally similar to those reported in adults. Stavudine pharmacokinetics have been evaluated in 25 HIV-infected pediatric patients ranging in age from 5 weeks to 15 years and in weight from 2 to 43 kg after I.V. or oral administration of single doses and twice daily regimens (see CLINICAL PHARMACOLOGY, Table 1 in full prescribing information). **Geriatric Use:** Clinical studies of ZERIT did not include sufficient numbers of patients aged 65 years and over to determine whether they respond differently than younger patients. Greater sensitivity of some older individuals to the effects of ZERIT cannot be ruled out. In a monotherapy Expanded Access Program for patients with advanced HIV infection, peripheral neuropathy or peripheral neuropathic symptoms were observed in 15 of 40 (38%) elderly patients receiving 40 mg twice daily and 8 of 51 (16%) elderly patients receiving 20 mg twice daily. Of the approximately 12,000 patients enrolled in the Expanded Access Program, peripheral neuropathy or peripheral neuropathic symptoms developed in 30% of patients receiving 40 mg twice daily and 25% of patients receiving 20 mg twice daily. Elderly patients should be closely monitored for signs and symptoms of peripheral neuropathy. ZERIT is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function. Because elderly patients are more likely to have decreased renal function, it may be useful to monitor renal function. Dose adjustment is recommended for patients with renal impairment (see DOSAGE AND ADMINISTRATION: Dosage Adjustment).

ADVERSE REACTIONS

Adults: ZERIT therapy has been associated with peripheral neuropathy, which can be severe, is dose related, and occurs more frequently in patients being treated with neurotoxic drug therapy, including didanosine, in patients with advanced HIV infection, or in patients who have previously experienced peripheral neuropathy. Patients should be monitored for the development of neuropathy, which is usually manifested by numbness, tingling, or pain in the feet or hands. Stavudine-related peripheral neuropathy may resolve if therapy is withdrawn promptly. In some cases, symptoms may worsen temporarily following discontinuation of therapy. If symptoms resolve completely, patients may tolerate resumption of treatment at one-half the dose (see DOSAGE AND ADMINISTRATION). If neuropathy recurs after resumption of ZERIT, permanent discontinuation of ZERIT should be considered. When ZERIT is used in combination with other agents with similar toxicities, the incidence of adverse events may be higher than when ZERIT is used alone. Pancreatitis, peripheral neuropathy, and liver function abnormalities occur more frequently in patients treated with the combination of ZERIT and didanosine, with or without hydroxyurea. Fatal pancreatitis and hepatotoxicity may occur more frequently in patients treated with ZERIT in combination with didanosine and hydroxyurea (see WARNINGS and PRECAUTIONS). Selected clinical adverse events that occurred in adult patients receiving ZERIT in a controlled monotherapy study (Study A1455-019) are provided by percentages as follows: ZERIT 40 mg twice daily ($n=412$)—Headache (54), Diarrhea (50), Peripheral Neurologic Symptoms/Neuropathy (52), Rash (40), Nausea and Vomiting (39); and zidovudine 200 mg 3 times daily ($n=402$)—Headache (49), Diarrhea (44), Peripheral Neurologic Symptoms/Neuropathy (39), Rash (35), Nausea and Vomiting (44). Study A1455-019 had a median duration of stavudine therapy = 79 weeks and a median duration of zidovudine therapy = 53 weeks. Pancreatitis was observed in three of the 412 adult patients who received ZERIT in a controlled monotherapy study. Selected clinical adverse events that occurred in antiretroviral naive adult patients receiving ZERIT from two controlled combination studies are provided by percentages as follows: START 1—ZERIT+lamivudine+indinavir ($n=100$) with a duration of stavudine therapy for 48 weeks—Nausea (43), Diarrhea (34), Headache (25), Rash (18), Vomiting (18), Peripheral Neurologic Symptoms/Neuropathy (8); zidovudine+lamivudine+indinavir ($n=102$)—Nausea (63), Diarrhea (16), Headache (26), Rash (13), Vomiting (33), Peripheral Neurologic Symptoms/Neuropathy (7). START 2—ZERIT+didanosine+indinavir ($n=102$) with a duration of stavudine therapy for 48 weeks—Nausea (53), Diarrhea (45), Headache (46), Rash (30), Vomiting (30), Peripheral Neurologic Symptoms/Neuropathy (21); zidovudine+lamivudine+indinavir ($n=103$)—Nausea (67), Diarrhea (39), Headache (37), Rash (18), Vomiting (35), Peripheral Neurologic Symptoms/Neuropathy (10). START 2 compared two triple-combination regimens in 205 treatment-naive patients. Patients received either ZERIT (40 mg twice daily) plus didanosine plus indinavir or zidovudine plus lamivudine plus indinavir. Pancreatitis resulting in death was observed in patients treated with ZERIT plus didanosine, with or without hydroxyurea, in controlled clinical studies and in postmarketing reports. Selected laboratory abnormalities reported in a controlled monotherapy study (Study A1455-019) are provided by percentage with the following parameters: ZERIT 40 mg twice daily ($n=412$)—AST (SGOT) >5.0 x ULN (upper limit of normal)—11%, ALT (SGPT) >5.0 x ULN—13%, Amylase ≥ 1.4 x ULN—14% and zidovudine 200 mg 3 times daily ($n=402$)—AST (SGOT) >5.0 x ULN—10%, ALT (SGPT) >5.0 x ULN—11%, Amylase ≥ 1.4 x ULN—13%. Data presented for patients of Study A1455-019 for whom laboratory evaluations were performed. Study A1455-019 had a median duration of stavudine therapy = 79 weeks and a median duration of zidovudine therapy = 53 weeks. Selected laboratory abnormalities reported in two controlled combi-

nation studies, START 1 and START 2 are provided Grades 3-4 presented first by percentage as follows: (Grades 3-4) START 1—ZERIT (stavudine)+lamivudine+indinavir ($n=100$)—Bilirubin >2.6 x ULN (upper limit of normal)—7%, SGOT (AST) >5 x ULN—5%, SGPT (ALT) >5 x ULN—6%, GGT >5 x ULN—2%, Lipase >2 x ULN—6%, Amylase >2 x ULN—4%; zidovudine+lamivudine+indinavir ($n=102$)—Bilirubin >2.6 x ULN—6%, SGOT (AST) >5 x ULN—2%, SGPT (ALT) >5 x ULN—2%, GGT >5 x ULN—2%, Lipase >2 x ULN—3%, Amylase >2 x ULN—1%. Percentages for (Grades 3-4) START 2—ZERIT+didanosine+indinavir ($n=102$)—Bilirubin >2.6 x ULN—16%, SGOT (AST) >5 x ULN—7%, SGPT (ALT) >5 x ULN—8%, GGT >5 x ULN—5%, Lipase >2 x ULN—8%, Amylase >2 x ULN—8%; zidovudine+lamivudine+indinavir ($n=103$)—Bilirubin >2.6 x ULN—8%, SGOT (AST) >5 x ULN—7%, SGPT (ALT) >5 x ULN—5%, GGT >5 x ULN—5%, Lipase >2 x ULN—5%, Amylase >2 x ULN—2%. Percentages for (All Grades) START 1—ZERIT+lamivudine+indinavir ($n=100$)—Total Bilirubin—65%, SGOT (AST)—42%, SGPT (ALT)—40%, GGT—15%, Lipase—27%, Amylase—21%; zidovudine+lamivudine+indinavir ($n=102$)—Total Bilirubin—60%, SGOT (AST)—20%, SGPT (ALT)—20%, GGT—8%, Lipase—12%, Amylase—19%. Percentages for (All Grades) START 2—ZERIT+didanosine+indinavir ($n=102$)—Total Bilirubin—68%, SGOT (AST)—53%, SGPT (ALT)—50%, GGT—28%, Lipase—26%, Amylase—31%; zidovudine+lamivudine+indinavir ($n=103$)—Total Bilirubin—55%, SGOT (AST)—20%, SGPT (ALT)—18%, GGT—12%, Lipase—19%, Amylase—17%. **Observed During Clinical Practice:** The following events have been identified during post-approval use of ZERIT. Because they are reported voluntarily from a population of unknown size, estimates of frequency cannot be made. These events have been chosen for inclusion due to their seriousness, frequency of reporting, causal connection to ZERIT, or a combination of these factors. **Body as a Whole:** abdominal pain, allergic reaction, and chills/fever. **Digestive Disorders:** anorexia, **Exocrine Gland Disorders:** pancreatitis (including fatal cases (see WARNINGS)), **Hematologic Disorders:** anemia, leukopenia, and thrombocytopenia. **Liver:** lactic acidosis and hepatic steatosis (see WARNINGS), hepatitis and liver failure. **Musculoskeletal:** myalgia. **Nervous System:** insomnia. **Pediatric Patients:** Adverse reactions and serious laboratory abnormalities in pediatric patients were similar in type and frequency to those seen in adult patients.

OVERDOSAGE

Experience with adults treated with 12 to 24 times the recommended daily dosage revealed no acute toxicity. Complications of chronic overdose include peripheral neuropathy and hepatic toxicity. Stavudine can be removed by hemodialysis; the mean \pm SD hemodialysis clearance of stavudine is 120 \pm 18 mL/min. Whether stavudine is eliminated by peritoneal dialysis has not been studied.

DOSAGE AND ADMINISTRATION

The interval between doses of ZERIT should be 12 hours. ZERIT may be taken without regard to meals. **Adults:** The recommended dose based on body weight is as follows: 40 mg twice daily for patients ≥ 60 kg and 30 mg twice daily for patients < 60 kg. **Pediatrics:** The recommended dose for pediatric patients weighing less than 30 kg is 1 mg/kg/dose, given every 12 hours. Pediatric patients weighing 30 kg or greater should receive the recommended adult dosage. **Dosage Adjustment:** Patients should be monitored for the development of peripheral neuropathy, which is usually manifested by numbness, tingling, or pain in the feet or hands. These symptoms may be difficult to detect in young children (see WARNINGS). If these symptoms develop during treatment, stavudine therapy should be interrupted. Symptoms may resolve if therapy is withdrawn promptly. In some cases, symptoms may worsen temporarily following discontinuation of therapy. If symptoms resolve completely, patients may tolerate resumption of treatment at one-half the recommended dose: 20 mg twice daily for patients ≥ 60 kg and 15 mg twice daily for patients < 60 kg. If neuropathy recurs after resumption of ZERIT, permanent discontinuation of ZERIT should be considered. **Renal Impairment:** ZERIT may be administered to adult patients with impaired renal function with adjustment in dose by patient weight as follows: Creatinine Clearance (mL/min) of >50 (≥ 60 kg—40 mg every 12 hours and < 60 kg—30 mg every 12 hours); Creatinine Clearance (mL/min) of 26-50 (≥ 60 kg—20 mg every 12 hours and < 60 kg—15 mg every 12 hours); Creatinine Clearance (mL/min) of 10-25 (≥ 60 kg—20 mg every 24 hours and < 60 kg—15 mg every 24 hours). Since urinary excretion is also a major route of elimination of stavudine in pediatric patients, the clearance of stavudine may be altered in children with renal impairment. Although there are insufficient data to recommend a specific dose adjustment of ZERIT in this patient population, a reduction in the dose and/or an increase in the interval between doses should be considered. **Hemodialysis Patients:** The recommended dose is 20 mg every 24 hours (≥ 60 kg) or 15 mg every 24 hours (< 60 kg), administered after the completion of hemodialysis and at the same time of day on non-dialysis days. **Method of Preparation: ZERIT for Oral Solution—**Prior to dispensing, the pharmacist must constitute the dry powder with purified water to a concentration of 1 mg stavudine per mL of solution, as follows: 1. Add 202 mL of purified water to the container. 2. Shake container vigorously until the powder dissolves completely. Constitution in this way produces 200 mL (deliverable volume) of 1 mg/mL stavudine solution. The solution may appear slightly hazy. 3. Dispense solution in original container with measuring cup provided. Instruct patient to shake the container vigorously prior to measuring each dose and to store the tightly closed container in a refrigerator, 36° to 46°F (2° to 8°C). Discard any unused portion after 30 days.

HOW SUPPLIED

ZERIT® (stavudine) Capsules are available in the following strengths and configurations of plastic bottles with child-resistant closures:

Product Strength	Capsule Shell Color	Markings on Capsule (in Black Ink)	Capsules per Bottle	NDC No.
15 mg	Light yellow & dark red	BMS 1964 15	60	0003-1964-01
20 mg	Light brown	BMS 1965 20	60	0003-1965-01
30 mg	Light orange & dark orange	BMS 1966 30	60	0003-1966-01
40 mg	Dark orange	BMS 1967 40	60	0003-1967-01

ZERIT® (stavudine) for Oral Solution is a dye-free, fruit-flavored powder that provides 1 mg of stavudine per mL of solution upon constitution with water. Directions for solution preparation are included on the product label and in the DOSAGE AND ADMINISTRATION section of this insert. ZERIT for Oral Solution (NDC No. 0003-1968-01) is available in child-resistant containers that provide 200 mL of solution after constitution with water.

US Patent No. 4,978,655

Storage: ZERIT Capsules should be stored in tightly closed containers at controlled room temperature, 59° to 86°F (15° to 30°C). ZERIT for Oral Solution should be protected from excessive moisture and stored in tightly closed containers at controlled room temperature, 59° to 86°F (15° to 30°C). After constitution, store tightly closed containers of ZERIT for Oral Solution in a refrigerator, 36° to 46°F (2° to 8°C). Discard any unused portion after 30 days.



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around the nation

Clinton caught in flap over lesbian joke overheard at NYC dinner

NEW YORK CITY—A controversy has erupted over whether former president Bill Clinton told lesbian jokes at a New York Italian restaurant. The *Washington Blade* reported that Clinton was eating with former Nebraska Sen. Bob Kerrey and several former staffers, including open lesbian chief of staff Karen Trumontano, and regaled his table with several "raunchy lesbian jokes." A Feb. 9 report in the *Washington Post's* "Reliable Source" column has Kerrey saying he was the joke teller, and that he and Clinton were reminiscing about a controversy during the 1992 presidential campaign when Kerrey apologized for telling a lesbian joke that was picked up by a C-SPAN camera. Kerrey refused to say whether Clinton was also telling jokes that evening. "I don't want to nail it down. To me, it's not sufficiently important to get the facts straight. I'm feeling a little like Rhet Butler. Frankly, I don't give a damn," said Kerrey, who now serves as president of Manhattan's New School University.



Former Nebraska Sen. Bob Kerrey has taken the blame for telling a 'raunchy lesbian joke' during a recent dinner with President Clinton in New York. Kerrey was criticized during his failed 1991 presidential campaign for a similar joke.

IL judicial board criticizes judge for anti-gay bias in decisions

CHICAGO—An Illinois agency filed a complaint Feb. 5 against a Cook County Circuit Court judge, claiming that her bias against gays "resulted in her making rulings contrary to Illinois law and advancing her own personal beliefs," the *Chicago Tribune* reported. The Judicial Inquiry Board filed the complaint against Judge Susan McDunn stemming from her handling of two lesbian adoption cases in 1998 and 1999. McDunn, the complaint alleged, continued to issue rulings despite the presiding judge removing her from the cases. McDunn also "disobeyed the law" by providing confidential information in the cases to a conservative Washington, D.C., group that opposes adoptions by gays. McDunn's handling of the cases prompted a stinging rebuke from the Appellate Court in June 1999, and led to her removal from courtroom duties. "This case is an egregious example of a judge putting her political viewpoint ahead of her judicial obligations," said John Gallo, who is handling the case for the state. McDunn's attorney, Michael Lavelle, pledged to mount a strong defense.

Cap on straight players fuels controversy in FL gay softball league

FORT LAUDERDALE—South Florida gay groups are threatening to boycott that area's gay softball league for limiting the number of straights who can play on a team to two, the *Fl. Lauderdale Sun-Sentinel* reported. The rule has been in place for years locally and nationally within the North American Gay Amateur Athletes Alliance, enabling gay players to be more open about displays of affection and preventing teams from trying to win by stacking the team with straight athletes. But this year, the rule incited a boycott of the South Florida Softball League by *Express*, a local gay paper, and the Gay & Lesbian Community Center. "We cannot say don't judge us by our sexual orientation and then turn around and judge others by it," said Larry Wald, co-owner of Cathode Ray bar, who threatened to pull his team and "do everything I can to make sure [the league] falls apart" if the rule remained.

Baltimore housing commish returns after drunken, anti-gay tirade

BALTIMORE—The city's housing commissioner, who took a month-long leave after a drunken episode during which he allegedly made anti-gay remarks, has apologized and was slated to meet with gay activists this week, the *Baltimore Sun* reported. Paul T. Graziano took paid leave Jan. 4 after admitting to a drinking problem. Gay leaders asked Baltimore Mayor Martin O'Malley to fire Graziano, but O'Malley declined after he apologized for the remarks, which Graziano said he did not remember making. "I would like to take the opportunity of our Feb. 13 meeting to express my heartfelt apologies for the hurt that I have inflicted and to explain how this horrible event has prompted me to recognize the presence of and obtain treatment for my illness," Graziano said in a statement released through the Gay & Lesbian Community Center of Baltimore. O'Malley chose Graziano, who had had been general manager of the New York City Housing Authority until last year, to run one of the city's most troubled agencies.

Democrats retain openly gay business writer as top official

WASHINGTON—Terry McAuliffe, newly installed chair of the Democratic National Committee, asked the committee to re-elect openly gay business writer Andrew Tobias as the Democratic Party's national treasurer, and the committee did so unanimously, the *Washington Blade* reported. McAuliffe's decision to retain Tobias, who became party treasurer in January 1999, is considered significant because of McAuliffe's reputation as an extraordinary political fund-raiser. Tobias is credited with raising more than \$10 million from gay contributors during his tenure. The Gay & Lesbian American Caucus of the Democratic National Committee also elected new officers Feb. 7, including chair Jeff Soref from New York, New Mexico delegate Gloria Nieto as vice chair, and Mandy Carter from North Carolina as secretary-treasurer.

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—From staff and wire reports

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Gay man charged in WA slaying of partner's mail-order bride

MOUNTLAKE TERRACE, Wash. (AP)—A woman who arrived from the former Soviet Union to marry an American was murdered last year, allegedly by a man who claims to be the male partner of the woman's husband. Anastasia Solovieva, 20 at the time of her death, was found in a shallow grave not far from her suburban Seattle home. Her husband, Indle King, Jr., 39, whose first marriage to another mail-order bride ended in divorce after she accused him of abuse, is jailed on perjury charges related to his wife's disappearance. Daniel Larson, 20, a former tenant at their house who claims he is King's gay partner, has been charged with Solovieva's death. Police say King led investigators to Larson, whom he had visited in jail where Larson was awaiting trial on unrelated charges of molesting a teen-age girl. Under police questioning, Larson allegedly said he strangled Solovieva with a necktie at King's request last September while King pinned her down. King denied playing a role in his wife's death.

Two lesbians included in pardon flurry during Clinton's last days

WASHINGTON—Two lesbians who had been convicted of planting a bomb in the U.S. capital in 1983 to protest the U.S. invasion of Grenada were among the 176 people who were issued pardons or clemency from Bill Clinton during his final days in office, the *Washington Blade* reported. Linda Evans and Susan Rosenberg, each of whom had been in prison for over a decade, were granted clemency by the president. A third lesbian involved in the bomb planting, Laura Whitehorn, had completed her sentence in 1999. Since her release, Whitehorn has worked as an assistant editor at *POZ* magazine. Evans, who lives in San Francisco, said she is excited about working again as an activist. Asked how the gay movement seems after more than a decade in prison, Evans said it was hard to tell. "I think too many gay people are identifying with the values that are against us or against life," she told the newspaper.



Linda Evans (left) and Susan Rosenberg, lesbians convicted of planting a bomb in Washington, D.C., were among the 176 people who received pardons in the final days of President Clinton's administration.

Protests over alleged bias don't delay execution of gay MO killer

POTOSI, Mo.—A gay man convicted of brutally murdering a teenage boy was put to death in Missouri on Feb. 7 despite protests by gay-rights and human rights organizations, Reuters reported. Stanley Dewaine Lingar, 37, died from legal injection while about 40 demonstrators protested outside the Potosi Correction Center, said prison spokesperson Tim Kniest. Lingar was sentenced to die for the January 1985 murder of Thomas Allen, 16, a high school student who was offered a lift by Lingar and Lingar's friend, David Smith. Lingar and Smith abducted Allen and killed him when he resisted orders to strip and masturbate in front of the men. Smith, who testified against Lingar, served a 10-year sentence. "The state of Missouri used Lingar's sexual orientation as a reason to give him a death sentence," said Queer Watch spokesperson William Dobbs.

Houston man arrested in strangulation death of popular drag queen

HOUSTON—A man accused in the death of Drin Shane Honeycutt, also known as popular female impersonator Brandi Houston, was arrested last week in Florida. Richard Masterson will face murder charges in Texas, said Sgt. R. G. Parish of the Houston Police Department. Parish declined to say where in Florida Masterson was picked up. Honeycutt, 35, was found dead in his apartment Jan. 27. There were "no visible wounds to his body," according to initial police reports, but police said Masterson allegedly strangled Honeycutt after the two met in a Houston gay bar. Honeycutt's car was missing, and police are considering robbery as a possible motive. They do not consider the murder to be a hate crime, Parish said. Honeycutt often raised funds for AIDS benefits and was popular in the Houston gay community. "Brandi was a big, big part of our community," said Don Gill, board chair for PWA Holiday Charities, which had recently named Honeycutt the group's "volunteer of the year" for 2000.

Lesbian couple sentenced in U.K. scheme to defraud investors

LONDON—A former brothel madam who rubbed shoulders with Queen Elizabeth II while defrauding wealthy investors was sentenced to five years in jail, the *Scotsman* reported. Australian Evelyn Burton, 57, together with her lesbian partner Lyla Andre, 50—who was sentenced to nearly four years in prison—used other investors' money to create the appearance of wealth and success, driving around in Rolls-Royces and staying at five-star hotels. An attorney told the court "that even professional men who otherwise are hard-headed and skilled in the matters of finance" were fooled by the women. Burton pleaded guilty to one count of conspiracy to defraud between October 1996 and March 1998. Andre admitted to one count of dishonestly retaining a wrongful credit card and two charges of evading a liability by deception. The two were once prostitutes who ran a massage parlor in Australia.



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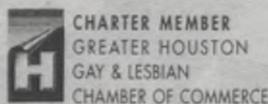
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EDITORIAL

Hotlines provide lifelines for gays



by MELINDA SHELTON

NEW ORLEANS—For many of us visible in the gay community, coming to terms with our sexual orientation and its myriad personal and social issues is something talked about in the past tense.

Undeniably, being out also places us at risk.

We are visible targets for homophobes. Our families and associates may—and often do—reject us. Employers can exercise silent discrimination, without openly having to say we're denied a promotion or a raise because we're gay.

But by coming out, we have chosen to confront our fears and conquer as many as possible. Being out builds self-esteem and forges alliances and friendships.

Coming out of the closet and going public about such an intimate, private aspect of one's self takes incredible courage.

Imagine a 15-year-old in Tupelo, Miss., struggling with his sexual orientation. Or a 20-year-old lesbian in Baton Rouge who was raped at a fraternity party. Or a woman or man in Atlanta, who has gender identity issues, but doesn't know where to turn for information.

For countless people like these, information and support are virtual lifelines for sur-

vival.

Four years ago, a group of community activists in New York decided to establish a national hotline to help people with sexual orientation or gender identity issues.

The Gay & Lesbian National Hotline first opened a volunteer-run office in New York, and today there is a second office in San Francisco.

To say there is a demand for the Gay & Lesbian National Hotline is an understatement: It receives more than 100,000 calls every year, primarily from troubled teens and young adults.

To say there is a demand for the hotline is an understatement: The hotline receives more than 100,000 calls every year, primarily from troubled teens and young adults.

The GLNH is a volunteer-based program with 75 volunteers, who work an average of six to eight hours a month at either of the two offices, said Brad Becker, GLNH's executive director. Its annual \$75,000 budget largely comes from private donations and foundation grants, and the bulk of the money is used to pay the telephone bills and office rent.

Volunteers are trained to provide crisis intervention and make referrals from the organization's national database of more than 18,000 listings.

Counselors also provide health information, particularly on ways to avoid transmitting or contracting sexually transmitted

diseases and HIV.

For many of the callers, speaking to a GLNH volunteer is the first time they've ever had personal contact with someone from the gay community.

Comforting words can mean the difference between life and death, as those of us who have done crisis line work, or who have made calls ourselves, know.

For many of the callers, it's also the first time they have ever been told their homosexual feelings are normal and are not to be feared. This validation, Becker said, is essential to building strong self-esteem.

"For a young person in a rural, isolated town, or whose family makes gay jokes, or whose teacher makes homophobic comments, or who goes to church and has to listen to anti-gay fire and brimstone preaching—actually talking to someone who's gay means they no longer feel like they're alone," Becker said.

Counselors do not give advice on what the person should do, but rather ask questions about what the person is feeling, what she or he wants to do, and how she or he thinks can solve their own problems, Becker said.

For many callers, simply talking to someone, expressing themselves about their sexual orientation and related issues and problems is an important first step.

"Some of the callers are too nervous to talk to anyone else but us," Becker said, "and they're not ready to take any step at all other than talking. It's our job to let them know what's there for them when they're ready."

Many of the callers, particularly the young ones, are reluctant to discuss their sexual activities, so volunteers are trained to broach the subject during the course of the conversation.

"The truth is, teens are the fastest-growing age group with new HIV infections, but a 15-year-old doesn't think he'll catch it by having sex with another 15-year-old," Becker said.

Education is yet another lifeline the counselors throw.

The GLNH database contains information on community centers and hotlines, doctors, lawyers, counselors, service agencies, health resources, gay-friendly businesses and gay-supportive groups in cities and communities across the nation.

The list, Becker says, is the largest of its kind in the world.

For the countless thousands of those who are invisible, the hotline—and others like it—provides a vital link to our community, and a greater sense of self-acceptance.

Melinda Shelton is the editor of *Southern Voice*, a sister paper to the *Houston Voice*.

INFO

Gay & Lesbian National Hotline

phone: 1-888-843-4564
Mon.-Fri., 4 p.m.-midnight
(Eastern Time)
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e-mail: glnh@glnh.org
Web site: www.glnh.org

Click and tell

'Stan' by Eminem?

Popular rapper Eminem has been roundly criticized for his misogynist and anti-gay lyrics. Despite the controversy, he could receive up to four Grammys during the Feb. 21 awards show on CBS. Now Elton John, singer and gay icon, has accepted an invitation to perform the rapper's song 'Stan' in a duet with Eminem during the show. Should gay men and lesbians even care?

- Gay rights groups like GLAAD were right to express 'disgust' with Elton.
- Elton should snap Eminem's 'olive branch' in two and feed it back to the repulsive rapper, washing it down with a dry Merlot.
- Eminem's lyrics have a direct effect on the lives of gays and he should be banned from the awards show.
- I'm gay, Eminem is hot, and I don't care what he raps about.

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The Houston Gay & Lesbian Switchboard operates 24 hours a day, 7 days a week. 713-529-3211



PLANT LIFE

Enough of 'feng shui by day'—and gay

by DREW PLANT

Is the feng shui craze over yet?
I mean, I am happier than a bear in a campground that people have gotten water features, mirrors and big hunks of rock in the right places in their homes, but it has just gone too far.

I do not want anyone else to tell me to cut down the single pine tree in front of my house (bad luck). Or to reroute the storm drain next to my house (it'll carry away my dreams, fertility or wealth, depending on who you ask—or don't ask).

Surely you have heard of feng shui (pronounced "fung schway"). If not, you must have spent recent years on the cast of a television show that deposits you in a remote area from which you can only return naked, rich and inexplicably famous.

No, as many Web sites, books and "feng shui by day" calendars will tell you, this "science" teaches "how to manipulate your surroundings to make an impact on your finances, health and emotions."

My feng shui frustration came to a head recently when some fool called me at work with a proposition that he come "balance" my office to further productivity and enhance my "professional well being." I had a hard time being polite.

I can tell you for absolutely no consulting fee whatsoever that my work-day mood would be improved by shorter days, long lunches and a bottle in my desk, not to mention the cessation of inane phone calls from someone who is going to move a tree to the other side of

my filing cabinet (a by-phone example this faux consultant gave me!).

Literally, feng shui means wind and water, and it's purported to be the ancient Chinese study of how to position yourself in the natural order of the universe. Key components: the year you were born, the environment surrounding you and movements of the solar system. I'm sure it started out legitimate enough, but then kooks and bad interior decorators got a hold of it.

Still, feng shui's defenders protest a bit too much that it is a scientific discipline (based on the analysis of energy). Well, someone who uses a compass in my house to tell me the whole damn place faces the wrong direction just doesn't seem too scientific to me.

By the way, a Feng Shui Master's compass is called a "Lo-Pan." The feng shui office balancer who called me felt it was important for me to know that he had his own and started every job with it. I didn't know what a Lo-Pan was, but I do love a man who brings his own equipment.

Especially after my Net-based research indicated that feng shui involves balls and more balls. Specifically, therapy balls. Sometimes Chinese therapy balls. Other times iron balls. And, get this, the advice that you should select small balls and gradually increase to larger balls as you become more comfortable with your work!

My Feng Shui Quest (also the title of my next romance novel) turned up an article on "sacred smells for your sacred spaces." No comment. Another feng shui tome proposes that a really thorough house cleaning can get rid of bad karmic

energy. Hey, my great-grandmother knew this and would have considered feng shui to be witchcraft at the very least.

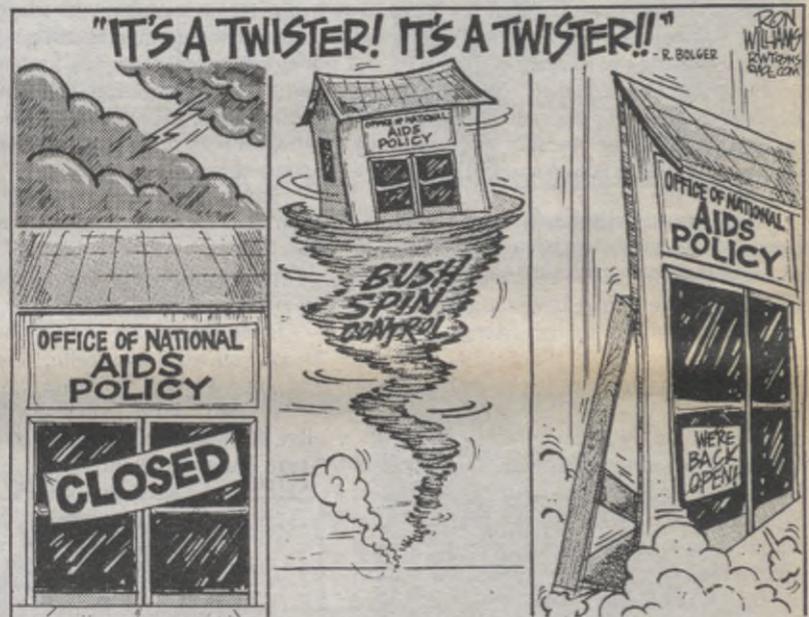
Then there seems to be a whole debate over wind chimes—what they have to be made of, where they have to be placed, when they have to be moved and whether they really have any feng shui zing at all. I won't even go into the fact that there is apparently an entire school of thought around feng shui being kosher (or not). Oy Vey!

I have most enjoyed learning and hearing about how to spot feng shui fakes and "feng shui charlatans." Even these feng shui consumer advocates

seem to be out for a buck. They ultimately sell you feng shui-zines (magazines for the devotee) and have Web sites full of stuff—mainly ducks and flutes and amulets that look like Angie Dickinson's earrings.

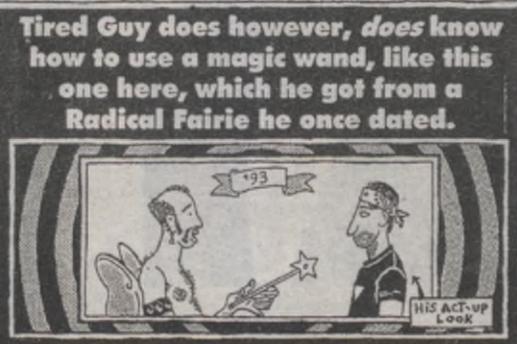
Then again, that may be exactly what this craze has going for it.

Drew Plant is an Atlanta-based writer who is, at this moment, concerned that the lack of a fire element in his home is a harbinger of bad resale value. Write Drewbob@mind-spring.com and tell him how you chose to hang your wind chimes.



The Mostly Unfabulous Social Life of Ethan Green...

...by Eric Orner



Lobby Day attendance has increased

> Continued from Page 1

are out and proud, so when they go back to their particular homes or neighborhoods, they don't carry the stereotype," Frye said.

She said she is glad to see DePalma and others leading the lobby day.

"It has allowed me to kind of sit back and be in an emeritus kind of a role," she said.

DePalma said the lobby day, held three times in the past, has seen a jump in attendance through the years. The first year, only seven people participated. Twenty people took to the marble the next time; 50 people showed up for the third event.

As many as 100 are expected this year.

They intend to speak out in favor of repealing the sodomy law and in favor of proposed nondiscrimination in education bills.

The group has not taken a position on the hate crimes bill, DePalma said.

"I polled our membership and we really could not reach a consensus on whether to support it," she said.

Some members believe it would make for bad law while others object that gender identity is not included in the bill. Still others say a toughened hate crimes law is a good symbol even if does not directly benefit transgendered people.

"Rather than fracture the community over an issue, we decided to take a non-position," DePalma said.

The activists will also lobby in favor of House Bill 1587, introduced by State Rep. Debra Danburg, D-Houston, which is aimed at simplifying the process of getting name and gender changed if a judge is presented with an affidavit from a doctor stating that a patient identifies as a gender different than the one on his or her official documents.

Simplifying that process is just one of number of things that needs to be happen to give transgender people less of a disadvantage in society, according to Brenda Thomas, who runs a transgender support group and works for the city of Houston on a program targeting transgendered people with HIV/AIDS education information.

"There's a really large gap in protection of any size, form, shape or dimension for our community," Thomas said. "Especially once they have transitioned, it's like they're a non-person. The state says they're neither male nor female."

DePalma said that unlike the gay lobbying event planned for March 18-19, there will be no march or protest as part of the transgender event.

"We feel like we would be better taking a low-key approach," she said. "We don't want to attract the media to a 'Jerry Springer Show'-like event."

Instead, they intend to gather the day before their event in space donated by a transgender clothing shop called the Cheshire Cat and train on how to be better lobbyists.

State Rep. Glen Maxey (D- Austin), Danburg and Lesbian Gay Rights Lobby of Texas Executive Director Dianne Hardy-Garcia are expected to help lead the training, DePalma said.

"It's not a simple matter of showing up. It's a matter of knowing what you're doing. We don't want anyone to be embarrassed in front of a legislator," she said.

On Tuesday at 8:30 a.m., the lobbyists will gather on the steps of the capitol for a photo, then go to the legislators to whom they were assigned at the training. Late arrivals will be whisked into space donated by Danburg where they will be given a crash course on lobbying, then released to visit a legislator.

DePalma said there is still much work to be done before legislators are likely to pay attention to the transgender community, but the gathering in Austin helps lay the groundwork for a network of activist who someday could make a difference.

"The truth of the matter is that this is largely an issue for us of community building," she said.

DePalma expressed that sentiment in a letter sent to activists by email.

"If you get nothing else from our lobby day, I hope you will leave feeling a sense of hope and empowerment," she said.

"We want you to go home with the knowledge that your voice mattered and your attendance made a difference."



Debra Danburg

Trans pioneer launches Website

by GIP PLASTER

Houston's longtime transgender activist Phyllis Frye has launched a new Web site aimed at sharing the wealth of legal information on transgender issues the attorney has written, helped write or simply collected through the years.

And while the site, transgenderlegal.com, already includes a complete book chapter by Frye, a partial archive of her "Phyllabuster" newsletter and plenty of other documents and links, Frye said it is nowhere near finished.

"There's about 85 percent more coming," she said.

The site is intended as a resource for lawyers, activists and any transgendered person who wants to know about struggles that have gone before.

"What's there and what's coming is a resource for lawyers who have transgendered clients but don't understand the nuances of the transgender issue and transgendered people themselves who want to hire an attorney and educate them," she said.

Frye has been a recognized leader in the struggle for transgender rights for more than 20 years. She challenged Houston's law against cross-dressing in 1981 and founded the International Conference on Transgender Law & Employment Policy in 1992.

The site features Chapter 22 from the book "Creating Change: Sexuality, Public Policy and Civil Rights." The chapter, entitled "Facing Discrimination, Organizing for Freedom: the Transgender Community," is an overview of the cause written by Frye.

Also already on the site are some of the most important documents in the short history of the transgender rights movement, including the International Bill of Gender Rights, Health Law Standards of Care and a document detailing standards for dealing with transgendered people in prisons.

Frye said she eventually plans to have much more of the information generated at the conference she started available on the site.

The site also includes a link to information and documents related to one of Frye's recent clients, Christie Littlefield. The transgendered woman was deemed legally a man after the death of husband and therefore left with no standing to sue her husband's doctor for malpractice.

There might be something there to help other lawyers, Frye said.

"It should give lawyers who are handling these cases a starting point, a jumping off point," she said.

The resource will also continue to grow as new works are produced.

Within a few weeks, an article Frye wrote for an upcoming issue of the College of William & Mary's "Journal of Women and the Law" will be added to the site.

"That is going to present an awful lot," she said. "It's a legitimate law review article in a legitimate law review journal."

Frye said she feels it is her responsibility to make this information available to others.

"Without patting myself on the back or blowing my own horn—which I'm not opposed to doing—I am the pioneer of national legal transgender activism," she said. "And I have either generated myself or produced in concert with other people a boatload of information."

But that information is often hard for others to obtain, she said.

"Unfortunately, a lot of this information has not been very available, but now it will be very available," she said.

"And the way you fight is to give people information."

INFO

transgenderlegal.com

tglegal.com

Phyllis Frye

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Censervatives to battle anti-bias ban

> Continued from Page 1
cities across the country do."

But the political climate inside the hearing and the heated rhetoric on the streets below was anti-climatic.

A day earlier, Houston Mayor Lee Brown—with the blessing of gay community leaders—put domestic partner benefits on hold, opting instead to support a more-sweeping ordinance banning discrimination against gays and lesbians who work for the city.

A similar Houston anti-discrimination order was passed by City Council in 1985, but soundly rebuffed by voters in a referendum noted for its rancor.

Fulfilling a campaign promise, in March 1998, Brown signed an executive order which banned discrimination in city government on the basis of sexual orientation. Although the mayor's authority to issue such an order did not require a vote from City Council, Council member Rob Todd and conservative businessman Richard Hotze filed an injunction against it, saying that the action contradicted the public vote of 1985.

Subsequently, Hotze was dropped from the suit by State District Judge Patrick W. Mizell, who said Hotze lacked standing to make a claim, but Todd carried on as the lone plaintiff.

A ruling from the Texas Supreme Court is expected in October.

By all accounts, Brown had the majority of Council votes needed to pass the insurance benefits question, but he switched strategy over the weekend and came out strongly for passage of the anti-discrimination ordinance.

Accompanied by City Council member Annise Parker, the panel's only openly gay member, supports both domestic partnership benefits and the anti-bias proposal, Brown met with 90 gay men and lesbians on Saturday to talk strategy.

In an informative meeting called together by his newly-appointed liaison to our community, Janine Brunjes, most of the people at the meeting wanted to delay the health contract issue and vigorously press forward with the anti-discrimination ordinance.

"They [the council members] either have to say I'm in favor of discrimination or I'm not. That is a better place to start than one particular area of benefits," said Mitchell Katine, a gay attorney who has taken on gay civil rights cases.

"This is the proper precursor to extending insurance coverage to domestic partners, so that the city employees will be protected against discrimination when they access insurance coverage," Parker said at a

news conference Monday.

In a written statement, Brown agreed.

"The non-discrimination ordinance will give current gay and lesbian city employees, and future city employees, comfort knowing that they will not lose their jobs if they select domestic partner benefits in the future," the mayor said.

But battle lines are being drawn.

A new, conservative group, Houstonians for Family Values, is forming and pushing a petition drive to place the issue before voters in November. The political action committee is led by Dave Wilson, a conservative activist and former mayoral candidate.

The language of the group's petition would bar the city from providing benefits to anyone but employees, their spouses, and their dependent children, as well as prevent "any privilege in promotion, hiring, or contracting on the basis of sexual preference."

Some 20,000 signatures are required to add a referendum to Houston's ballot.

Calling same-sex benefits a moral issue, Wilson said, "Homosexual behavior is a sin."

Brown, who has a track record of attending Gay Pride parades and speaking to gay groups, said the anti-bias measure is the right move to make.

"I just don't think we should discriminate against anyone," he said.



DALTON DEHART

City Council member Annise Parker said an anti-bias ban would protect gay city employees who come out and ask for domestic partner benefits.

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HIV prevention efforts face uncertain future

A prominent gay activist challenges San Francisco AIDS stats, as the CDC announces a new prevention effort and the Bush administration waffles on AIDS office

by ERIN O'BRIANT

A study showing rates of new HIV infections among gay men in San Francisco have doubled since 1997 came from "weak" research using uneven samples, a prominent gay author charged last week.

Gay pundit Andrew Sullivan took issue with statements issued by the San Francisco HIV Consensus Meeting, which said the rate of new HIV infections in San Francisco could reach 2.2 percent this year, up from the 1.04 percent rate last year.

Meanwhile, Centers for Disease Control & Prevention officials announced a new HIV prevention initiative at the 8th Conference on Retroviruses & Opportunistic Infections in Chicago Feb. 4-8, and the Bush administration waffled on whether the Office of National AIDS Policy would remain open.

SF studies flawed?

The San Francisco research indicated a doubling of the rates of new HIV infections since 1997 in the city.

But according to Sullivan, those numbers can be explained by fluctuations in sample size. Only one of the studies in the body of research has "a reasonably representative sample of young gay men," he said.

Even that study came under fire from Sullivan, who claimed that fluctuations in sample size undermined researchers' conclusions.

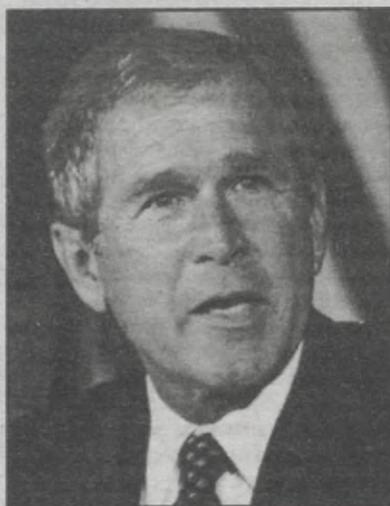
Thomas Coates, director of the AIDS Research Institute & Center for AIDS Prevention Studies at the University of California, San Francisco, responded by saying the study Sullivan specifically criticized has "been published in peer reviewed journals and has withstood the peer review system."

Sullivan described the other studies in the report as "equally weak."

"No single study is without limitation,"



AIDS experts fear 'an ineffective federal response to AIDS in this country and abroad' if the Bush administration doesn't fully support its AIDS office, said Terje Anderson, executive director of the National Association of People with AIDS.



A spokesperson for President Bush first said the new president would cancel the Office of National AIDS Policy, but Bush's chief of staff later called the statement a 'mistake.'

countered Coates. "But when such a large array of indicators, data, trends, numbers, community input and even actual clinic and health care visits indicate that something is shifting in the wrong direction, we would do best to not argue with the data but address the issue."

Focus on knowing HIV status

The CDC hopes to address the problem of new infections with its new HIV prevention program, the Serostatus Approach to Fighting the HIV Epidemic (SAFE). The initiative focuses on expanding voluntary counseling and testing programs to reach everyone living with HIV infection, including the estimated 200,000-275,000 Americans who are not aware that they are infected.

Officials hope SAFE will cut new HIV infections in half nationwide by 2005.

According to Robert Janssen, director of the CDC's division of HIV/AIDS prevention, studies show that people who know they are infected with HIV take steps to protect their partners. Also, new HIV therapies, by lowering viral load, may reduce an HIV-positive person's degree of infectiousness.

CDC officials said the organization needs an additional \$200 million in funding to pursue the project fully.

"Funding will have to be from both public and private sources, leveraging the special skills the private sector has that we don't have," said Janssen.

Fate of national AIDS office

The CDC may rely more heavily than before on private funds for HIV prevention during President Bush's tenure.

HIV confab yields troubling stats, new guidelines

by ERIN O'BRIANT

The 8th Conference on Retroviruses and Opportunistic Infections took place in Chicago Feb. 4-8. Conference papers and presentations outlined important information for people affected by HIV and AIDS, including:

- A study presented at the conference by Susan J. Little of the University of California at San Diego showed that the incidence of drug-resistant strains of new HIV infection has risen to 14 percent. Participants in the study were from Birmingham, Ala., and other cities in North America, according to the *New York Times*.

Robert Janssen, director of the division of HIV/AIDS prevention at the Centers for Disease Control, suggested that researchers aren't sure whether Little is comparing numbers among people in the same population.

- The Department of Health & Human

Services and the Henry J. Kaiser Family Foundation issued an updated version of the "Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents" Feb. 5. The new guidelines recommend that doctors begin treatment when patients have a higher viral load and lower CD4 count than before.

- An ongoing study by a CDC epidemiologist showed that urban gay and bisexual men ages 23-29 have an overall HIV prevalence of 12.3 percent. The study, which included surveys of more than 2,400 men, sampled participants at public venues in Baltimore, Dallas, Los Angeles, Miami, New York City and Seattle. Thirty percent of young African-American gay and bisexual men, 15 percent of Hispanics and 7 percent of whites were diagnosed with the virus.

"We're very concerned about the high rates of HIV among gay men of color and are looking at our best response to that," Janssen said.

USA Today and other news organizations reported last week that the Bush administration would close both the White House Office of National AIDS Policy and the President's Initiative for One America, after White House Chief of Staff Andrew Card made a statement to that effect.

But after the story broke, White House spokesperson Ari Fleischer denied plans to close the AIDS office, saying Card's statement was "a mistake."

In a press briefing Feb. 7, Fleischer said President Bush will continue to have an office dedicated to "fight[ing] the scourge of AIDS." The Department of Health & Human Services will "be detailing people to the White House," he said.

"In addition, at our Domestic Policy Council we will have a White House employee who is dedicated to fighting AIDS and developing policies that can help us fight AIDS. There is also a task force in place that will remain in place that also is concerned with the battle against AIDS," Fleischer said.

AIDS activists said they fear the Bush administration's waffling could bode ill for the campaign against the epidemic.

"Nothing I have heard from President Bush or Ari Fleischer clarifies the simple question, 'Are you going to have an AIDS czar whose exclusive responsibility is to be a national and international leader on AIDS issues?'" said Alexis Schuler, spokesperson for AIDS Action.

Fleischer avoided specific mentions of and plans for ONAP, the President's Advisory Council on HIV/AIDS, and the position of national AIDS policy director,

Schuler said.

Terje Anderson, executive director of the National Association of People with AIDS, expressed similar concerns.

"There are a lot of federal programs that affect people with AIDS and having one person in one office coordinating them and providing a voice in the White House is incredibly important," Anderson said. "The fear that we have is that we will have an ineffective federal response to AIDS in this country and abroad."

White House representatives did not return phone calls by press time.

ACTION | info

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Gays want meeting with Bush's faith-based office

Pro-gay groups worry granting federal money to religious-based social service organizations could institutionalize homophobia

by ERIC ERICKSON

A coalition of pro-gay religious and secular groups is calling for a meeting with John Dilulio, the University of Pennsylvania professor tapped to head the new White House Office of Faith-based & Community Initiatives.

Gay rights advocates and other critics of the recently announced office say they fear it will violate the Constitution's guarantee of separation of church and state, and put gay men and lesbians at risk of

discriminatory treatment from religious groups that oppose homosexuality.

The new White House office, and similar offices created by Bush in five government departments, topped the agenda last week when the National Gay & Lesbian Task Force and Equal Partners in Faith convened the semi-annual meeting of the National Religious Leadership Roundtable, an interfaith network of 40 religious leaders who advocate for pro-gay religious perspectives.

The NRLR concluded its meeting with calls for a discussion with the man who will head the new faith-based office, and a message for the new president.

"We want Bush to know there are progressive people of faith in the LGBT community and that our voices are going to be heard by media and society," said Rev. Steven Baines, executive coordinator of Equal Partners in Faith.

The new offices will promote competition for \$10 billion in federal grants, previously unavailable to religious organizations. Under Bush's proposal, any religious group providing social services may apply for federal funding.

"If I'm homeless," asked NGLTF spokesperson David Elliot, "and I go to a soup kitchen, am I going to have to pray in

order to be fed or am I going to be prayed over? ... We have very fundamental concerns that his proposal poses a threat to both GLBT social service workers and social service recipients."

Elliot said NGLTF and other gay organizations fear these religious groups could use federal money to promote their own conservative agenda. "It's an attack on our community," he said. "I've come not to expect much from this administration. The important thing to keep in mind is that if these proposals go through we will face discrimination."

Bush has insisted that bias will not occur his proposal. While religious groups will be able to keep their religious symbols, character and internal governing structure during and after the grant application process, they cannot use the funds for actual worship, religious education or conversion. In fact, under the plan, any congregation, including primarily gay congregations like Metropolitan Community Churches, would be eligible for funding.

Yet Elliot said he remains skeptical. "Do you really think the Bush administration is going to favor our churches over the conservative Baptist churches?" he asked.

Baines said he shares those concerns. "We know from everything we see the Bush administration has done, [the funds are] going to go to groups that support his conservative theological viewpoints," he said.



Gay activists say they want to meet with John Dilulio, tapped to head the new White House Office of Faith-Based & Community Initiatives.

Because many Americans doubt the quality of services currently available from government social service agencies, Bush has said he wants money to go to local religious group and civic organizations. Bush said these groups can use contacts in their own community to better work with needy people.

Baines said he recognizes religious groups can administer quality services, and he would be in favor of funding them with federal dollars, but only if they set up separate entities to deliver services.

The Office of Faith-Based and Community Initiatives is scheduled to open Feb. 20.

ACTION | info

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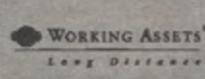
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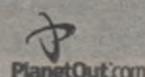
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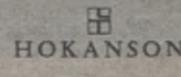
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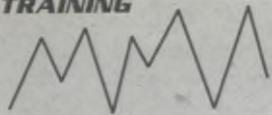
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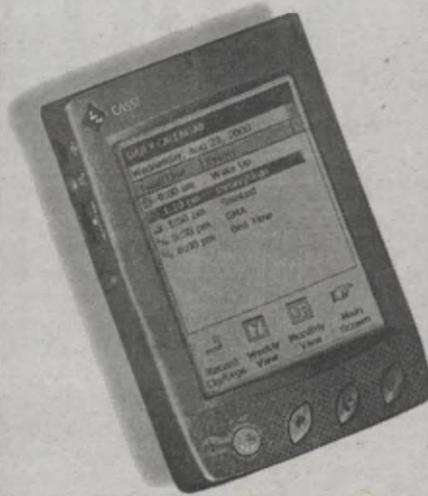
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compiled by REX WOCHNER and STAFF REPORTS

"Don't Fear It, Don't Flaunt It."

—Christopher Dandeker, who heads the war studies department at Kings College London, to the *New York Times*, Feb. 10. Dandeker was comparing the approach of the British military to gays serving openly to the U.S. military policy of "Don't Ask, Don't Tell." Britain removed its ban on openly gay service members last year.



"I am telling you, you're gonna blink and you'll be 80 and alone in a caftan with a lap full of catnip saying, 'Here kitty kitty kitty.' It's time to put the sex back in homosexual, Will."

—Jack (Sean Hayes, left) to Will (Eric McCormack) on NBC's "Will & Grace," Feb. 1.

"The most significant social change in the United States during the Clinton presidency was the social mainstreaming of gay Americans and the ebbing of anti-gay prejudice."

—Author Bruce Bawer writing in the *New York Times*, Jan. 26, about the impact of President Clinton's administration on gay men and lesbians.

"I get all kinds of e-mails telling me I'm working with the Nazis. But we're optimistic that President Bush will keep a dialogue going with the community."

—Kevin Ivers of the Log Cabin Republicans to the *New York Times*, Jan. 26. LCR has been criticized by some gay civil rights groups for not opposing conservative appointments to the Bush administration, like Attorney General John Ashcroft, who has made anti-gay statements as an elected official.

"Ronan threw me out of Boyzone because I wasn't gay enough—it's as simple as that."

—Ex-Boyzone member Shane Lynch (right) criticizing former band mate Roman Keating for wanting him to be like Stephen Gately, the former Boyzone member who came out while still in the band, in the *Mirror's* "3am" column.



"I hope no young gay man somewhere out there watches the show [Showtime's 'Queer As Folk'], packs his U-Haul, and moves to Pittsburgh, thinking he's going to a gay mecca. That would be kind of sad for him."

—Pittsburgh advertising executive Robert Handley to *USA Today*, Jan. 25.



"It was my publicist, Stan, and he didn't dress well."

—Actor George Clooney (left) when asked by reporters at the Golden Globe awards Jan. 21 who his date was for the evening.

"Stuart grins when he's fucking; you know he's having a good time. Brian looks grim and angry. Stuart has a heart; Brian is soulless. Stuart flirts with an attractive medical worker in the hospital; Brian fucks an attractive medical worker in the room where his friend is lying in a coma. Watching Stuart have sex, I want to join in. Watching Brian have sex, I want to scrub myself

off with Lysol. If I'm going to watch sex, anonymous or otherwise, I'd like it to feature at least some minimal sense of delight at the touch of another human being. Otherwise I could just jerk off to 'On Golden Blond' or 'Guess Who's Coming at Dinner' or whatever this week's porno hit is called."

—Dave Tuller comparing the protagonist of the British "Queer As Folk" (Stuart) with the protagonist of the American version (Brian). *Salon.com*, Jan. 10.

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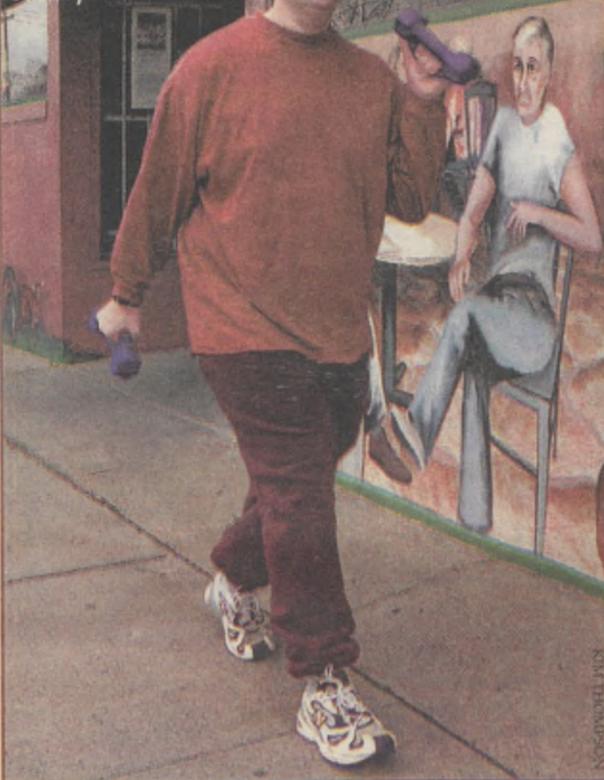
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Out on the Bayou

A guide for your leisure time

HOUSTON VOICE • FEBRUARY 16, 2001

Self-confessed 'coach potato' Jimmy Brown is organizing a gay walking group, which hosts its inaugural event on Saturday at Memorial Park.



Walking with family

Just in time for better weather, a new gay walking group is kicking up dust at Memorial Park

by D.L. GROOVER

How would you like to take a brisk morning constitutional in Memorial Park? How about taking your walk with some new friends? How about having breakfast after your hour's stroll with your new friends?

Then the Gay & Lesbian Breakfast Club is for you. This new social group is the brainchild of Jimmy Brown, who masterminded the Movie Club a few years back, a gay and lesbian group that combined dinner and a movie. It stayed in operation for about 18 months, but the scheduling hassles finally were too much for him.

"It got real exhausting: picking the movie, leaving everyone messages. I had to plan a restaurant near the movie. But after all the obstacles they'd still come," he said.

Wanting some exercise after sitting through all those movies, Brown started walking.

"I've been walking for about two years now," he said. "I do it every week anyway, and this way I'll have other people to talk to and keep my mind off how hot

it is outside."

The group kicks off Saturday at 8 a.m.

The course is 2.9 miles, and Brown said it takes an hour to walk it.

"I'm very much a coach potato-type person, and the first time I did it, it was a little challenging. They have a running group out there, but I tried that and I just can't run. I've had people call and say, I don't know if I can make it around that track. But if you can walk a shopping mall from front to back, you can walk around this track," he said.

The club has no dues and no rules, except for the starting time. If you don't want to exercise, stay at home until it's time to meet the group for breakfast at Java Java Café, 911 W. 11th Street in the Heights.

To get the word out to as many prospective walkers as possible without spending bags of cash, Brown left fliers at the Houston Lesbian & Gay Community Center, and a few gay and gay-friendly churches like Bering, St. Steven's and MCCR.

"I'm pretty sure it's going to start off slow," he said. "But over time, it'll get bigger and bigger. I think after

> Continued on Page 22

Spring Theater Preview, Act II

From tragedy to 'Naked Boys Singing,' spring schedule offers something for all



by D.L. GROOVER

Houston ranks second only to New York City in the number of theater seats located in a downtown area—and this spring's schedule illustrates the wide variety of shows available with so many venues to choose from.

Houston's Theater District Association has calculated that our city on the bayou cushions 14,428 overstuffed posteriors for the performing arts. That impressive number, however, encompasses only those theaters facing the torn-up streets of downtown and doesn't include the restroom-friendly Hobby Center now under construction.

We are a theater-mad city, and inspiring work goes on all over town, all the time. Whatever your taste, it will

be sated. There's so much, in fact, that our Spring Theater Preview had to be split in two to adequately cover all that's about to happen. Go to the theater, whatever art form turns you on; it just might change your life.

Bienvenue Theater

3722 Washington Ave.

713-426-2626

NAKED BOYS SINGING, dates not set

Although no dates have been set as of press time, Christian DeVries continues the fantastically successful franchise of "Naked Boys Singing." This cleverly directed cash cow doesn't have a thought in its head, but the herds of gentlemen lining up to view the unclothed

> Continued on Page 23

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Eating Out

RESTAURANT REVIEW

Sushi as it should be

Ginza offers outstanding food, unassuming style

by TRACE DISKIN

If there's one thing Houston restaurants do well, it's the art of transformation. Leave it to Houston's chefs to redefine, rework, or fuse a cuisine, menu or dining space until it's stylishly, and often deliciously, deviant.

Until a friend and I stepped into GINZA, a popular but unassuming sushi bar in the Tanglewood neighborhood, I barely noticed how jazzed up the rest of our Japanese restaurants really are.

Unlike the brightly-lit, tightly-packed, urban sushi dens of New York, San Francisco, D.C. and Boston, most Houston Japanese restaurants seem to follow the trend of dimly lit, swanky establishments where authenticity falls second to ambiance and innovation. That's why Ginza truly makes a Northern sushi lover feel like she's home again.

With pale bamboo light fixtures, wall hangings and simple, blonde wood furniture, Ginza sets a tone that's more cafe than hip nightspot. One royal blue wall and the blue and white patterned carpet lend a colorful, if understated touch, and make the rather large space feel intimate and local. Although the tables and booths are closely placed to one another, and families with kids chat about warmly in the open space, it's never too loud or encroaching.

The eel is particularly prodigious and succulent, and since it's the only sushi that's actually cooked, it's a must for raw fish eaters and skeptics alike.

When it comes to authenticity, though, one only has to open the menu. A virtual phone book of appetizers covers an entire page, with nearly 50 Japanese staples listed alphabetically.

The Edamame (\$3.50), which are hard to come by at other, more upscale sushi haunts, appear on practically every customer's table. Edamame, for the uninitiated, are steamed green soybeans still in the pod, and sprinkled coarse salt. Served hot or cold, they pack a deep, nutritious flavor, and make great nibbling food while waiting for other, more substantial dishes.

Although I predict it won't be long before you can grab them from the freezer section at your nearest Kroger or Randalls, right now they're only available at Asian specialty grocers. Fortunately, Ginza serves them hot and in abundance, with each bean nearly bursting out of its grassy, salty skin. The Seaweed Salad (\$4.50) is another find, with dark, gelatinous strips of seaweed in a piquant vinegar and soy ginger dressing.

But when it comes to sushi bars, the rule is judge strictly by sushi, and here is where low-

Ginza

5868 San Felipe
713.785.0332

FOOD FILE

Food:

Service:

Value:

Scene:

Opt for bread, water at home

OK, if you really must

Fine for most

Worth the drive, so live a little

As good as it gets

key Ginza clearly shines. The fish is incredibly fresh and beautifully handled and presented, but most of all huge. A piece of nigiri sushi, that's one piece of sushi on a bed a rice, is \$3.95 for 2 pieces and easily three times the size of that of other restaurants.

The eel is particularly prodigious and succulent, and since it's the only sushi that's actually cooked, it's a must for raw fish eaters and skeptics alike. The salmon and mackerel were also impressive in size and quality.

Although Ginza doesn't go overboard on cleverly named rolls as much as other places, the rolls they do serve are artful and frighteningly good. Do not pass up the Caterpillar Roll (\$8.50), with cooked eel rolled in marinated rice and slathered in thin strips of avocado. Not only does the combination of flavors explode on the tongue, but the garnishings of shrimp, octopus and flying fish roe for eyes are adorably delectable.

If Ginza falls short at all, it is in the rather unremarkable main entrees, such as Chicken Teriyaki (\$8.95), or Tempura (\$6.95). The chicken, for example, arrived with chopped peppers and onions coated so thickly in a gelatinous sauce that it resembled Chinese food more than anything Japanese. And the small nugget-like pieces of chicken did little for the texture, which usually does fine in tenderly grilled strips.

The Soba Noodle dishes (\$6.95), however, make for loud and eager slurping, and the miso soup is well stocked with fresh green seaweed, chunks of tofu and tasty mushrooms.

Ginza features the staple desserts—Red Ban or Green Tea Ice Cream (\$2.50)—from a popular Japanese grocery brand advertised on many of the booths. The service is friendly and efficient, and it's common for the staff to recognize return customers and make them feel immediately at home with a pot of green tea.

As a break from the often overbearing atmosphere of other Japanese restaurants, Ginza makes the perfect choice. So enjoy the unpretentious setting, but stay for the outstanding sushi.

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Shon G., Atlanta

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SAFETY INFORMATION

- Make sure to see your doctor regularly because serious side effects can occur, such as muscle damage and a decrease in red and white blood cells
- A buildup of acid in the blood and an enlarged liver, including fatal cases, have been seen
- The most frequent side effects are headache, upset stomach, malaise or fatigue, and runny nose
- Low risk of fat wasting, tingling or burning in the hands and feet, or problems with the pancreas

¹Scott-Levin, Source Prescription Audit (retail pharmacies), January to June 2000.
²Roché Amplicor HIV-1 MONITOR[®] Test.

CALL 1-800-760-3311 for information or visit our Web site at www.TreatHIV.com



Glaxo Wellcome
HIV Division

Please see Brief Summary for COMBIVIR on the adjacent page.

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CBV436R0

November 2000

BRIEF SUMMARY

COMBIVIR® Tablets (lamivudine/zidovudine tablets)

The following is a brief summary only; see full prescribing information for complete product information.

WARNING: ZIDOVUDINE, ONE OF THE TWO ACTIVE INGREDIENTS IN COMBIVIR, HAS BEEN ASSOCIATED WITH HEMATOLOGIC TOXICITY INCLUDING NEUTROPENIA AND SEVERE ANEMIA, PARTICULARLY IN PATIENTS WITH ADVANCED HIV DISEASE (SEE WARNINGS). PROLONGED USE OF ZIDOVUDINE HAS BEEN ASSOCIATED WITH SYMPTOMATIC MYOPATHY.

LACTIC ACIDOSIS AND SEVERE HEPATOMEGALY WITH STEATOSIS, INCLUDING FATAL CASES, HAVE BEEN REPORTED WITH THE USE OF NUCLEOSIDE ANALOGUES ALONE OR IN COMBINATION, INCLUDING LAMIVUDINE, ZIDOVUDINE, AND OTHER ANTIRETROVIRALS (SEE WARNINGS).

INDICATIONS AND USAGE: COMBIVIR in combination with other antiretroviral agents is indicated for the treatment of HIV infection.

Description of Clinical Studies: COMBIVIR: There have been no clinical trials conducted with COMBIVIR. See CLINICAL PHARMACOLOGY for information about bioequivalence. One COMBIVIR Tablet given twice a day is an alternative regimen to EPVIR Tablets 150 mg twice a day plus RETROVIR 600 mg per day in divided doses.

Lamivudine Plus Zidovudine: The NUC3007 (CAESAR) study was conducted using EPVIR 150-mg Tablets (150 mg b.i.d.) and RETROVIR 100-mg Capsules (2 x 100 mg t.i.d.). CAESAR was a multicenter, double-blind, placebo-controlled study comparing continued current therapy (zidovudine alone (62% of patients) or zidovudine with didanosine or zalcitabine (38% of patients)) to the addition of EPVIR or EPVIR plus an investigational non-nucleoside reverse transcriptase inhibitor (randomized 1:2:1). A total of 1816 HIV-infected adults with 25 to 250 (median 122) CD4 cells/mm³ at baseline were enrolled; median age was 36 years, 87% were male, 84% were nucleoside-experienced, and 16% were therapy-naïve. The median duration on study was 12 months. Results are summarized in Table 1.

Table 1: Number of Patients (%) With At Least 1 HIV Disease-Progression Event or Death

Endpoint	Current Therapy (n = 460)	EPVIR plus Current Therapy (n = 896)	EPVIR plus a NNRTI* plus Current Therapy (n = 460)
HIV progression or death	90 (19.6%)	86 (9.6%)	41 (8.9%)
Death	27 (5.9%)	23 (2.6%)	14 (3.0%)

*An investigational non-nucleoside reverse transcriptase inhibitor not approved in the United States.

CONTRAINDICATIONS: COMBIVIR Tablets are contraindicated in patients with previously demonstrated clinically significant hypersensitivity to any of the components of the product.

WARNINGS: COMBIVIR is a fixed-dose combination of lamivudine and zidovudine. Ordinarily, COMBIVIR should not be administered concomitantly with either lamivudine or zidovudine.

The complete prescribing information for all agents being considered for use with COMBIVIR should be consulted before combination therapy with COMBIVIR is initiated.

Bone Marrow Suppression: COMBIVIR should be used with caution in patients who have bone marrow compromise evidenced by granulocyte count <1000 cells/mm³ or hemoglobin <8.5 g/dL (see ADVERSE REACTIONS).

Frequent blood counts are strongly recommended in patients with advanced HIV disease who are treated with COMBIVIR. For HIV-infected individuals and patients with asymptomatic or early HIV disease, periodic blood counts are recommended.

Lactic Acidosis/Severe Hepatomegaly with Steatosis: Lactic acidosis and severe hepatomegaly with steatosis, including fatal cases, have been reported with the use of nucleoside analogues alone or in combination, including lamivudine, zidovudine, and other antiretrovirals. A majority of these cases have been in women. Obesity and prolonged nucleoside exposure may be risk factors. Particular caution should be exercised when administering COMBIVIR to any patient with known risk factors for liver disease; however, cases have also been reported in patients with no known risk factors. Treatment with COMBIVIR should be suspended in any patient who develops clinical or laboratory findings suggestive of lactic acidosis or pronounced hepatotoxicity (which may include hepatomegaly and steatosis even in the absence of marked transaminase elevations).

Myopathy: Myopathy and myositis, with pathological changes similar to that produced by HIV disease, have been associated with prolonged use of zidovudine, and therefore may occur with therapy with COMBIVIR.

PRECAUTIONS:

Patients With HIV and Hepatitis B Virus Coinfection: In clinical trials and postmarketing experience, some patients with HIV infection who have chronic liver disease due to hepatitis B virus infection experienced clinical or laboratory evidence of recurrent hepatitis upon discontinuation of lamivudine. Consequences may be more severe in patients with decompensated liver disease.

Patients With Impaired Renal Function: Reduction of the dosages of lamivudine and zidovudine is recommended for patients with impaired renal function. Patients with creatinine clearance <50 mL/min should not receive COMBIVIR.

Information for Patients: COMBIVIR is not a cure for HIV infection and patients may continue to experience illnesses associated with HIV infection, including opportunistic infections. Patients should be advised that the use of COMBIVIR has not been shown to reduce the risk of transmission of HIV to others through sexual contact or blood contamination. Patients should be informed that the major toxicities of COMBIVIR are neutropenia and/or anemia. They should be told of the extreme importance of having their blood counts followed closely while on therapy, especially for patients with advanced HIV disease. Patients should be advised of the importance of taking COMBIVIR as it is prescribed.

Drug Interactions: Coadministration of zalcitabine, interferon- α , and other bone marrow suppressive or cytotoxic agents may increase the hematologic toxicity of zidovudine (see CLINICAL PHARMACOLOGY section of full prescribing information).

Carcinogenesis, Mutagenesis, and Impairment of Fertility: Carcinogenicity:

Lamivudine: Lamivudine long-term carcinogenicity studies in mice and rats showed no evidence of carcinogenic potential at exposures up to 10 times (mice) and 58 times (rats) those observed in humans at the recommended therapeutic dose.

Zidovudine: Zidovudine was administered orally at 3 dosage levels to separate groups of mice and rats (60 females and 60 males in each group). Initial single daily doses were 30, 60, and 120 mg/kg per day in mice and 80, 220, and 600 mg/kg per day in rats. The doses in mice were reduced to 20, 30, and 40 mg/kg per day after day 90 because of treatment-related anemia, whereas in rats only the high dose was reduced to 450 mg/kg per day on day 91 and then to 300 mg/kg per day on day 279.

In mice, 7 late-appearing (after 19 months) vaginal neoplasms (5 nonmetastasizing squamous cell carcinomas, 1 squamous cell papilloma, and 1 squamous polyp) occurred in animals given the highest dose. One late-appearing squamous cell papilloma occurred in the vagina of a middle-dose animal. No vaginal tumors were found at the lowest dose.

In rats, 2 late-appearing (after 20 months), nonmetastasizing vaginal squamous cell carcinomas occurred in animals given the highest dose. No vaginal tumors occurred at the low or middle dose in rats. No other drug-related tumors were observed in either sex of either species.

At doses that produced tumors in mice and rats, the estimated drug exposure (as measured by AUC) was approximately 3 times (mouse) and 24 times (rat) the estimated human exposure at the recommended therapeutic dose of 100 mg every 4 hours.

Two transplacental carcinogenicity studies were conducted in mice. One study administered zidovudine at doses of 20 mg/kg per day or 40 mg/kg per day from gestation day 10 through parturition and lactation with dosing continuing in offspring for 24 months postnatally. The doses of zidovudine employed in this study produced zidovudine exposures approximately 3 times the estimated human exposure at recommended doses. After 24 months, at the highest dose, an increase in incidence of vaginal tumors was noted with no increase in tumors in the liver or lung or any other organ in either gender. These findings are consistent with results of the standard oral carcinogenicity study in mice, as described earlier. A second study administered zidovudine at maximum tolerated doses of 12.5 mg/day or 25 mg/day (1-1000 mg/kg nonpregnant body weight or 450 mg/kg of term body weight) to pregnant mice from days 12 through 18 of gestation. There was an increase in the number of tumors in the lung, liver, and female reproductive tracts in the offspring of mice receiving the higher dose level of zidovudine.

It is not known how predictive the results of rodent carcinogenicity studies may be for humans.

Mutagenicity: Lamivudine: Lamivudine was negative in a microbial mutagenicity screen, in an in vitro cell transformation assay, in a rat micronucleus test, in a rat bone marrow cytogenetic assay, and in an assay for unscheduled DNA synthesis in rat liver. It was mutagenic in a L5178Y/TK⁺ mouse lymphoma assay and clastogenic in a cytogenetic assay using cultured human lymphocytes.

Zidovudine: Zidovudine was mutagenic in a L5178Y/TK⁺ mouse lymphoma assay, positive in an in vitro cell transformation assay, clastogenic in a cytogenetic assay using cultured human lymphocytes, and positive in mouse and rat micronucleus tests after repeated doses. It was negative in a cytogenetic study in rats given a single dose.

Impairment of Fertility: Lamivudine: In a study of reproductive performance, lamivudine, administered to male and female rats at doses up to 130 times the usual adult dose based on body surface area considerations, revealed no evidence of impaired fertility (judged by conception rates) and no effect on the survival, growth, and development to weaning of the offspring.

Zidovudine: Zidovudine, administered to male and female rats at doses up to 7 times the usual adult dose based on body surface area considerations, had no effect on fertility judged by conception rates.

Pregnancy: Pregnancy Category C.

COMBIVIR: There are no adequate and well-controlled studies of COMBIVIR in pregnant women. Reproduction studies with lamivudine and zidovudine have been performed in animals (see Lamivudine and Zidovudine sections below). COMBIVIR should be used during pregnancy only if the potential benefits outweigh the risks.

Reference: 1. Hammer SM, Squires KE, Hughes MD, et al. A controlled trial of two nucleoside analogues plus didanosine in persons with human immunodeficiency virus infection and CD4 cell counts of 200 per cubic millimeter or less. *N Engl J Med.* 1997;337:725-733.

COMBIVIR® Tablets (lamivudine/zidovudine tablets)

Lamivudine: Reproduction studies with orally administered lamivudine have been performed in rats and rabbits at 130 and 60 times, respectively, the usual adult dose (based on relative body surface area) and have revealed no evidence of teratogenicity. Some evidence of early embryolethality was seen in the rabbit at doses similar to those produced by the usual adult dose and higher, but there was no indication of this effect in the rat at orally administered doses up to 130 times the usual adult dose. Studies in pregnant rats and rabbits showed that lamivudine is transferred to the fetus through the placenta.

Zidovudine: Reproduction studies with orally administered zidovudine in the rat and in the rabbit at doses up to 500 mg/kg per day revealed no evidence of teratogenicity with zidovudine. Zidovudine treatment resulted in embryo/fetal toxicity as evidenced by an increase in the incidence of fetal resorptions in rats given 150 or 450 mg/kg per day and rabbits given 500 mg/kg per day. The doses used in the teratology studies resulted in peak zidovudine plasma concentrations (after one-half of the daily dose) in rats 66 to 228 times, and in rabbits 12 to 87 times, mean steady-state peak human plasma concentrations (after one-sixth of the daily dose) achieved with the recommended daily dose (100 mg every 4 hours). In an additional teratology study in rats, a dose of 3000 mg/kg per day (very near the oral median lethal dose in rats of 3653 mg/kg) caused marked maternal toxicity and an increase in the incidence of fetal malformations. This dose resulted in peak zidovudine plasma concentrations 350 times peak human plasma concentrations. No evidence of teratogenicity was seen in this experiment at doses of 600 mg/kg per day or less. Two rodent carcinogenicity studies were conducted (see Carcinogenesis, Mutagenesis, Impairment of Fertility).

Antiretroviral Pregnancy Registry: To monitor maternal-fetal outcomes of pregnant women exposed to COMBIVIR and other antiretroviral agents, an Antiretroviral Pregnancy Registry has been established. Physicians are encouraged to register patients by calling 1-800-258-4263.

Nursing Mothers: The Centers for Disease Control and Prevention recommend that HIV-infected mothers not breastfeed their infants to avoid risking postnatal transmission of HIV infection.

COMBIVIR: Zidovudine is excreted in breast milk (see CLINICAL PHARMACOLOGY: Pharmacokinetics: Nursing Mothers subsection of full prescribing information); however, no data are available on COMBIVIR or lamivudine. Therefore, there is a potential for adverse effects in nursing infants. Mothers should be instructed not to breastfeed if they are receiving COMBIVIR.

Pediatric Use: COMBIVIR should not be administered to pediatric patients less than 12 years of age because it is a fixed-dose combination that cannot be adjusted for this patient population.

Geriatric Use: Clinical studies of COMBIVIR did not include sufficient numbers of subjects aged 65 and over to determine whether they respond differently from younger subjects. In general, dose selection for an elderly patient should be cautious, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy. COMBIVIR is not recommended for patients with impaired renal function (i.e., creatinine clearance <50 mL/min; see PRECAUTIONS: Patients with Impaired Renal Function and DOSAGE AND ADMINISTRATION).

ADVERSE REACTIONS:

Lamivudine Plus Zidovudine Administered As Separate Formulations: In 4 randomized, controlled trials of EPVIR 300 mg per day plus RETROVIR 600 mg per day, the following selected clinical and laboratory adverse events were observed (see Tables 2 and 3).

Table 2: Selected Clinical Adverse Events (>5% Frequency) in 4 Controlled Clinical Trials With EPVIR 300 mg/day and RETROVIR 600 mg/day

Adverse Event	EPVIR plus RETROVIR (n = 251)
Body as a whole	
Headache	35%
Malaise & fatigue	27%
Fever or chills	10%
Digestive	
Nausea	33%
Diarrhea	18%
Nausea & vomiting	13%
Anorexia and/or decreased appetite	10%
Abdominal pain	9%
Abdominal cramps	6%
Dyspepsia	5%
Nervous system	
Neuropathy	12%
Insomnia & other sleep disorders	11%
Dizziness	10%
Depressive disorders	9%
Respiratory	
Nasal signs & symptoms	20%
Cough	18%
Skin	
Skin rashes	9%
Musculoskeletal	
Musculoskeletal pain	12%
Myalgia	8%
Arthralgia	5%

Pancreatitis was observed in 3 of the 656 adult patients (<0.5%) who received EPVIR in controlled clinical trials. Selected laboratory abnormalities observed during therapy are listed in Table 3.

Table 3: Frequencies of Selected Laboratory Abnormalities Among Adults in 4 Controlled Clinical Trials of EPVIR 300 mg/day plus RETROVIR 600 mg/day*

Test (Abnormal Level)	EPVIR plus RETROVIR % (n)
Neutropenia (ANC <750/mm ³)	7.2% (237)
Anemia (Hgb <8.0 g/dL)	2.9% (241)
Thrombocytopenia (platelets <50,000/mm ³)	0.4% (240)
ALT (>5.0 x ULN)	3.7% (241)
AST (>5.0 x ULN)	1.7% (241)
Bilirubin (>2.5 x ULN)	0.8% (241)
Amylase (>2.0 x ULN)	4.2% (72)

ULN = Upper limit of normal.

ANC = Absolute neutrophil count.

n = Number of patients assessed.

*Frequencies of these laboratory abnormalities were higher in patients with mild laboratory abnormalities at baseline.

Observed During Clinical Practice: In addition to adverse events reported from clinical trials, the following events have been identified during post-approval use of EPVIR and/or RETROVIR. Because they are reported voluntarily from a population of unknown size, estimates of frequency cannot be made. These events have been chosen for inclusion due to a combination of their seriousness, frequency of reporting, or potential causal connection to EPVIR and/or RETROVIR.

Endocrine and Metabolic: Hyperglycemia.

General: Sensitization reactions (including anaphylaxis), vasculitis.

Hepatobiliary Tract and Pancreas: Lactic acidosis and hepatic steatosis (see WARNINGS), pancreatitis.

Musculoskeletal: Muscle weakness, CPK elevation, rhabdomyolysis.

Nervous: Seizures.

Skin: Alopecia, erythema multiforme, Stevens-Johnson syndrome, urticaria.

OVERDOSAGE:

COMBIVIR: There is no known antidote for COMBIVIR.

Lamivudine: One case of an adult ingesting 6 grams of lamivudine was reported; there were no clinical signs or symptoms noted and hematologic tests remained normal. It is not known whether lamivudine can be removed by peritoneal dialysis or hemodialysis.

Zidovudine: Acute overdoses of zidovudine have been reported in pediatric patients and adults. These involved exposures up to 50 grams. The only consistent findings were nausea and vomiting. Other reported occurrences included headache, dizziness, drowsiness, lethargy, confusion, and 1 report of a grand mal seizure. Hematologic changes were transient. All patients recovered. Hemodialysis and peritoneal dialysis appear to have a negligible effect on the removal of zidovudine while elimination of its primary metabolite, GZDV, is enhanced.

DOSAGE AND ADMINISTRATION: The recommended oral dose of COMBIVIR for adults and adolescents (at least 12 years of age) is 1 tablet (containing 150 mg of lamivudine and 300 mg of zidovudine) twice daily.

Dose Adjustment: Because it is a fixed-dose combination, COMBIVIR should not be prescribed for patients requiring dosage adjustment such as those with reduced renal function (creatinine clearance <50 mL/min) or those experiencing dose-limiting adverse events.

GlaxoWellcome

Glaxo Wellcome Inc.
Research Triangle Park, NC 27709

Lamivudine is manufactured under agreement from BioChem Pharma Inc.,
Laval, Quebec, Canada

US Patent Nos. 5,047,407; 4,818,538; 4,828,838; 4,724,232; 4,833,130; 4,837,208; 5,859,021 and 5,905,082

October 2000/RL-874

health news

Medical implant could give women pleasure at push of a button

WINSTON-SALEM, N.C.—A physician in North Carolina is working on a medical implant that could offer women the chance to experience orgasm at the push of a button, according to CNN. Stuart Meloy, the doctor seeking a patent for the device, thinks it could allow women with orgasmic dysfunction to resume normal sex lives. The device would work by implanting electrodes in the spine and a small signal generator in the skin under the buttocks. The patient could then control the sensation with a handheld remote control. "I was treating [a patient with] a chronic pain condition and generated a response I was not anticipating," Meloy said. The patient told Meloy of the reaction, and his experiments shifted from the study of pain to that of pleasure. Clinical trials could begin later this year if Meloy receives funding from a major medical implant manufacturer. The initial cost would be \$15,000, not including the surgical procedures required to install the device.

Microbicides see limited development over profit, liability concerns

CHICAGO—A potential avenue of AIDS prevention, the creation of microbicide gels and creams that would kill HIV during sex, may be thwarted by troubles during experimental trials, the *Chicago Sun-Times* reported. Microbicides would be especially valuable in fighting AIDS in Africa, where condom use is limited, and in some instances, during anal sex. "Ideally, women will one day be able to choose from among a wide range of microbicides, as they now choose from among a range of contraceptives," according to a report by the Alan Guttmacher Institute, a think tank specializing in reproductive health issues. But most big drug companies aren't developing microbicides because they would be sold over-the-counter, where profits are lower and liabilities higher. A company could be sued, for example, if its microbicide failed to prevent an HIV infection, scientists said. One microbicide being tested in Chicago is Pro 2000, which coats HIV, preventing it from entering and infecting human cells.

Mapping of genes could lead to secrets of genetic code, disease

WASHINGTON (AP)—Scientists released the results of the Human Genome Project, the mapping of the genes that comprise the human genetic code. "We are confirming Darwin," Sir John Sulston, who is spearheading the British end of the project, told Reuters on Feb. 12. One of the key uses of the project could be the ability to fight disease, since mutations in the genome either cause or predispose at least 1,500 diseases. Cancer researcher Barbara J. Trask told Associated Press that cancer is currently treated as a "disease of the genome" with a "sledgehammer approach." But the information gleaned from the mapping could lead to treatments that address only the cancer and leave the rest of the body alone. The project could also lead to an understanding of why AIDS affects some people immediately while leaving others unaffected for years.

The recently released results of the Human Genome Project could unleash the secrets to diseases like AIDS, said researcher Sir John Sulston.



Feds slow experimental drug approvals spurred by 1992 law

NEW YORK—U.S. drug regulators took almost 40 percent more time in 2000 than they did in 1999 to approve new prescription drugs, Reuters reported. The U.S. Food & Drug Administration last year approved 27 medicines that have active ingredients never before sold in the country. Last year, the FDA took an average of 17.6 months to approve the experimental drugs, compared with only 12.6 months for the 35 it approved in 1999. The slowdown ended a seven-year streak of faster approval times that was spurred by passage of the Prescription Drug User Fee Act in 1992, which was actively lobbied for by AIDS groups. Janet Woodcock, head of the FDA's Center for Drug Evaluation & Research, said her agency last year met all of the goals imposed by the 1992 law, including reviewing half of all original new drug applications within 10 months. "The FDA has met all of our goals. In fact, we exceeded them," Woodcock said.

Drugs pulled from market posed greater risk to women, FDA says

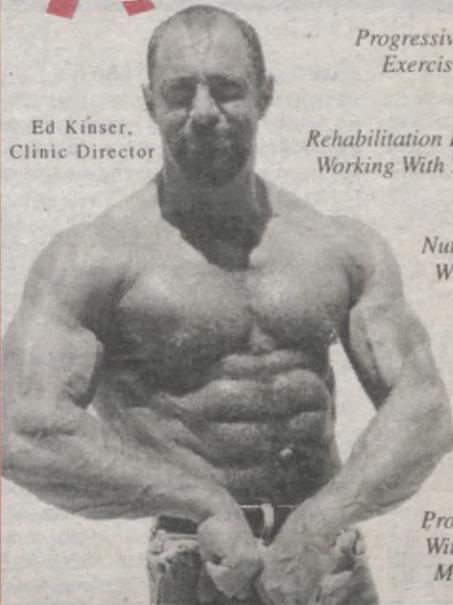
WASHINGTON—A draft of a federal government report suggests that eight of 10 prescription drugs that have been pulled from the market for safety reasons since early 1997 may have posed greater risks to women than to men, according to CNN. The General Accounting Office report points out that the withdrawal of a drug from the market is less a judgment on the safety of a particular drug, and more a judgment on the relative risks and benefits compared with available alternatives. Four of the eight drugs may have showed disproportionate levels of risk to women because they are more often prescribed for women. The GAO report noted that in four other cases where drugs were evenly prescribed to men and women, physiological differences between the sexes may account for the higher risks. The drugs in question range from appetite suppressants Pondimin and Redux, antihistamines Seldane and Hismanal, the heartburn drug Propulsid, and Lotronex, which was used to treat irritable bowel syndrome.

—From staff and wire reports



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Ed Kinser,
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Bayou Calendar

Diana Ross

Gay-friendly icon and glam diva, Miss Ross goes country and appears at the Rodeo of all places. If she can scrap off the road apples from her ostrich boots, look for an appearance around 8:45 p.m., but that's dubious. Feb. 16, Reliant Astrodome, 8400 Kirby, 713-629-3700

Alvin Ailey American Dance Theater

There's no better way to celebrate Black History Month than Alvin Ailey's jubilant "Revelations." It is a triumphant musical expression of the human spirit—glory and joy set to rousing black church music: spirituals, song-sermons, gospels, and holy blues. Choreographer Ailey's finest work, it can be seen on every program of this company's weekend visit. Other works on the programs include artistic director Judith Jamison's "Divining," Ailey's "Pas de Duke" to music by Duke Ellington, and Ulysses Dove's "Episodes." Fabulous bodies, fabulous dancing. Feb. 16 & 18, 8 p.m., Feb. 17, 2 p.m. Jones Hall 615 Louisiana 713-227-4SPA

Black Gays & Lesbians In History

An alternative view in celebrating Black History Month. If Michael Jackson is the only gay black man (or black woman, for that matter) you can think of, then this dialogue and history lesson is for you. Let's see, we could talk about George Washington Carver, Alvin Ailey, Josephine Baker, Benjamin Benneker, Langston Hughes, Barbara Jordan, Lorraine Hansberry, James Baldwin, Billy Strayhorn, Bayard Rustin, Alice Walker, Ruth C. Ellis, Howard Rollins, Angela Davis. Feb. 17, 6:30 to 9:30 p.m. Community Gospel Church 4305 Lillian 713-880-9235

Runt of the Litter

Once a pro-baller with the Houston Oilers (remember them?), then an actor appearing on "ER" and "The John Larroquette Show," now Bo Eason's a writer/actor in his own one-man show. He plays a professional football player who's pitted against his brother in a pivotal championship game. However, dredging up family history makes this big galoot tackle the big questions about his sport, his dad, and his quest for fame. Whatever the out-

come, he's got to be a better actor than Arnold, or O.J., or Greg. Feb. 21-March 18, Stages Repertory Theatre, 3201 Allen Parkway; Waugh at D'Amico, 713-527-8243

Five Poems & The Firebird

Two artistic directors of two of the best ballet companies, our own Ben Stevenson and National Ballet of Canada's James Kudelka, have created a memorable ear-and-eyeful for Houston Ballet's next program. Stevenson has taken Wagner's lush Romantic "Wesendonck Lieder" and set it to lyric dancing, while Kudelka gives his characteristic cerebral spin to Stravinsky's sublime and magical score. Jane Seymour—yes, Dr. Quinn Medicine Woman—is a respected artist and has opened her paint box to design the Wagner in pastel cloudscapes. Veteran designer Santo Loquasto puts the fairy tale Firebird in the steamy jungles of Central America. The colors, the colors! Feb. 22-March 4, Houston Ballet Wortham Theater Center, 500 Texas 713-227-ARTS

Breakfast Club walks

> Continued from Page 17

it catches on, it's going to become popular. The people who have called, they've genuinely been very excited about it. 'Oh, cool, I can't wait.' They're very interested in it. I'm happy about that.

"We call it the Gay & Lesbian Breakfast Club, but I would love to have some straight people join us. I just want the gay and lesbian people to feel very welcome.

"As I was walking I would see people who I suspect were gay, but you can't go up and ask them. Yeah, our family's out here. So, surely there are other people who would want to do this with me," Brown said.

Gay & Lesbian Breakfast Club

Feb. 17, 8 a.m.

Memorial Park, tennis center
1500 E. Memorial Loop Drive
phone: 713-864-7299

Web site:
<http://members.aol.com/morningclub/gayfun3.htm#top>

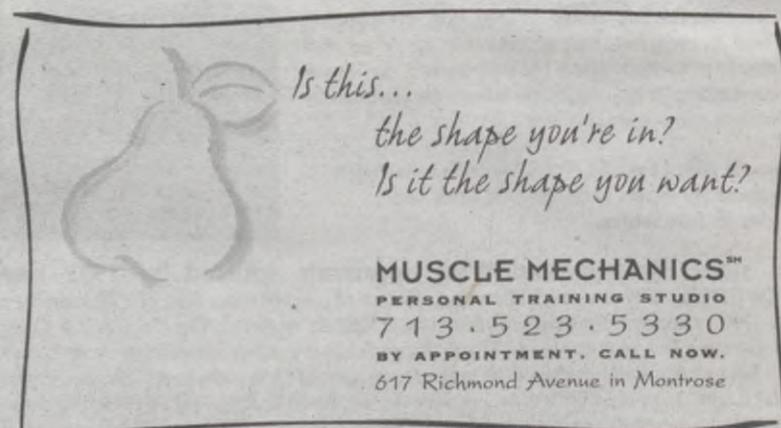
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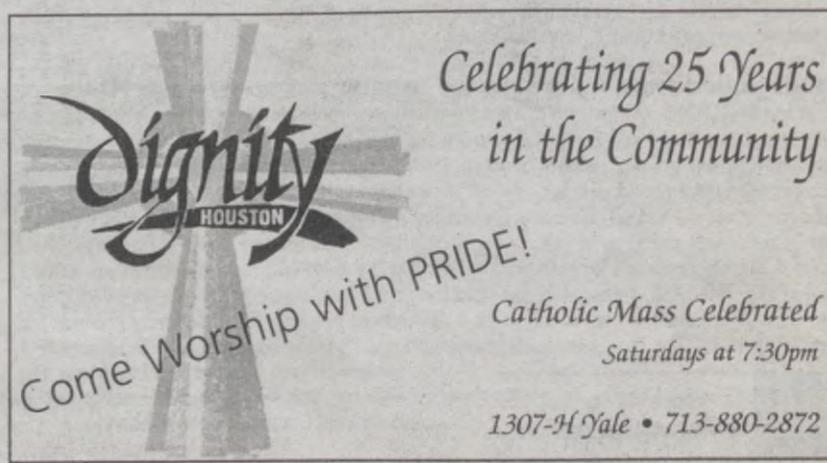
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Spring theater preview, act II

> Continued from Page 17
singers don't seem to mind.

Encore Theatre

4816 Main Street
713-527-8277

ANTIGONE, April 6-28

Founded in 1994 to provide quality theater to the inner-city and also as a training ground for aspiring professionals, Encore is going to give us all a run for our money with some dramatic productions, including this masterpiece from the very beginning of theater history.

Sophocles' tragedy defines the term: a harrowing tale of personal responsibility vs. the state, represented by an implacable Creon, whose need to be in control brings destruction to his family in the mother of all dramas.

Infernal Bridegroom Productions

Atomic Café
1320 Nance Street
ACTION and
CHICAGO, Feb.
23-March 17

These one-acts give us a rare Houston opportunity to experience early Sam Shepard, when he was the downtown grunge



voice of his generation, before he started playing polo and hangin' with Jessica. When he was the John the Baptist of playwrights, crying in the wilderness, letting it all hang out, raw and powerful, if not always in control.

Stu, who's ensconced in a tub in Shepard's Obie-winning 1965 "Chicago," goes on linguistic flights of fancy when his girlfriend announces she's leaving him to go to Chicago. Disjointed and in pain, he says whatever's in his head, no matter the situation. As he splashes in the water, Stu's stream-of-conscious monologues make sense. Life's unraveling, but you've still got to breathe.

"Action," from 1975, is a riff on identity, and an actor's godsend. Life as performance art is given full rein. "I'm looking forward to my life," one of the four misplaced characters says, "the way I picture me." But there's no escape from where they've come. It's all part of the baggage they can't escape.

Little Room Downstairs

2332 Bissonnet
713-522-5737

VISITING MR. GREENE, through March 17

Oy, what a nice play. Jeff Baron's two character comedy/drama has the warm, comforting smell of chicken soup. There's so much, in fact, that we start ducking.

This feel-good matzo ball of a play, designed to leave us uplifted and better off for it, is beautifully acted and smoothly directed,

but it's so squishy and shameless we don't want to pinch its cheeks so much as smack it. Get tough, scream out, do something! But it won't; it just plods.

You can guess its inevitable conclusion from the get-go, and the shocking revelations are handled with all the emotional depth of a sit-com. There's a gritty, much better play contained within, but Baron doesn't want to write it. He'd rather lull than shock, please than disturb. At the fade out, the two men wait anxiously for the door to open so Mr. Green's age-old family conflict can finally resolve. It wouldn't surprise us in the least if Molly Goldberg waddled in.

DISPARATE INGREDIENTS, March 16 - April 21

Now, this sounds promising. A world premiere musical by Richard Laub, LRD's artistic director, about a big city mayoral election, an ultra-conservative politico, his gay-but-closeted spin doctor and his illegitimate son. Any city we know?

THE WISDOM OF EVE, May 25-June 30

Mary Or's "Cosmopolitan" short story from 1946, the basis for Joseph L. Mankiewicz's truly classic cinematic fable of fame, "All About Eve," comes to the stage with its original venom still wet and potent enough to inflict psychic damage. If the coruscating humor and sophisticated devilry of the film is halfway realized, then Eve's wisdom will be imparted to satisfied full houses. Fasten your

seatbelts.

Main Street Theater

713-524-6706

Without question, the only Equity theater in town with two separate buildings (their small Village location and their Chelsea Market space for larger works), Main Street Theater delights with diversity.

THE COUNTESS, through February 25, 2540 Times Blvd.

To paraphrase Giotto, Gregory Murphy's play is no oil painting. He takes the impasto and the bold brush strokes and the erotic coloring of one of Victorian England's most scandalous trios and turns the whole shocking affair into a pencil sketch, blanching the life out of it.

In 1853, John Ruskin, England's preeminent art critic (and admirer of very, very young girls, although this juicy tidbit is barely picked at) invited studly pre-Raphaelite painter John Millais to join him and his young bride on a trip to Scotland where Ruskin would impart his considerable knowledge to the impressionable artist. What got impressed instead was Ruskin's nubile bride and the painter. Repressed Victorian England wasn't prepared for a messy picture like this.

Sexual hypocrisy, repression and priggish conformity vs. a woman's emancipation, great art and an unconsummated wedding night. Enough good stuff for any drama.

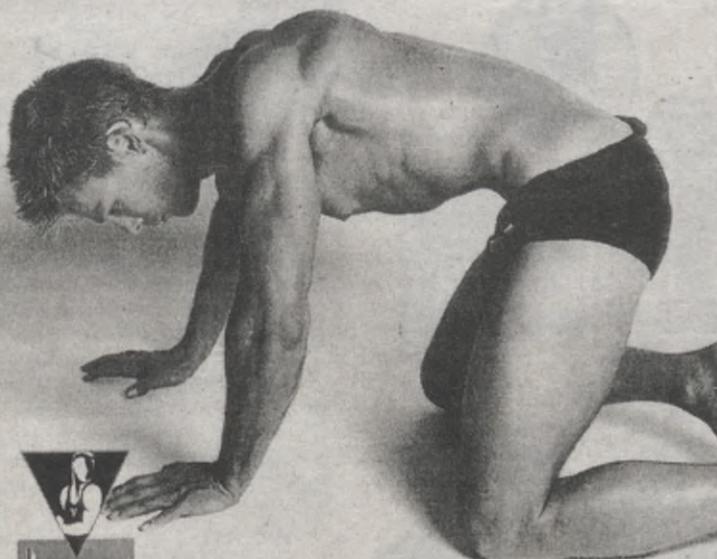
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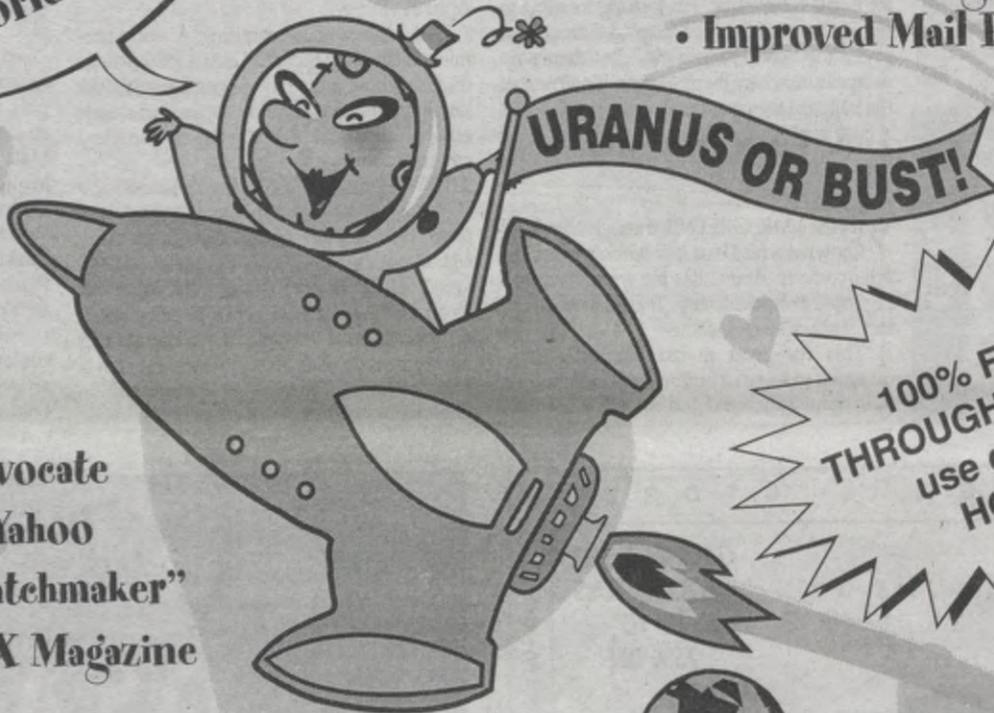
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on screen FILM, VIDEO & TV REVIEWS

by STEVE WARREN

You are who you eat

A fictional sequel and an original documentary both offer a unique perspective on life

When Hannibal Lecter (Anthony Hopkins), the thinking person's Freddy Krueger, announces, "I need to come out of retirement and return to public life," fasten your seat belts!

It's ten years after "The Silence of the Lambs." The FBI is still after Lecter but so is his sole surviving victim, filthy and rich Mason Verger (Gary Oldman), who lives in Asheville's Biltmore Estate.

What's left of Verger's face is horrible to behold. A flashback shows how he got that way when he picked Lecter up one night and brought him home to party.

HANNIBAL is the ideal sequel, familiar yet different. Jodie Foster is sorely missed as FBI Agent Clarice Starling, although Julianne Moore is as good as any substitute could have been. Ridley Scott ("Gladiator") fares better, replacing Jonathan Demme as director and keeping production values first-class all the way.

A bisexual woman character has been dropped from Thomas Harris' source novel, but Verger is gay and the Justice Department's Paul Krendler (Ray Liotta) homophobic; so the villain roster offers something for everyone and GLAAD will still have plenty to bitch about. Hannibal's Panama hat makes him look rather like Truman Capote, but his madness is beyond sexuality.

If you have a problem with Verger cutting off his own face while high on poppers and swinging from a noose, forget about seeing the movie. Like "Silence of the Lambs" it's not for the faint of heart or stomach, but it's done with more than enough grace notes to distinguish it from the typically cheesy movies of the genre.

So many, in fact, that you have to be patient while the plot is set in motion; but know that your patience will be rewarded.

Clarice gets in trouble when a drug bust goes bad. Krendler, a misogynist as well as a homophobe, is sent to help with damage control. Verger, who wants to administer his own justice to Lecter, offers a reward that Italian police detective Giancarlo Giannini goes after; but Verger also rekindles the FBI's interest in one of their Ten Most Wanted, who has been laying low for a decade.

Memorable sequences become more numerous as we approach the climactic dinner-table scene: Lecter lecturing on the link between avarice and hanging in art as Giannini nears his date with destiny; the three-way cat-and-mouse game at Union Station; Lecter's encounter with wild boars as carnivorous as he is; and his strange relationship with Clarice that makes her want to protect him even as she hunts him down.

Moore lacks Foster's vulnerability and faces more competition than her predecessor, with Hopkins' role being much larger and

INFO
'Hannibal'
 Directed by Ridley Scott
 Starring Anthony Hopkins, Julianne Moore, Gary Oldman
Queer Quotient: There's one despicable gay character but he's not as bad as the killer in "Silence of the Lambs," and for balance there's a homophobe who's almost as unpleasant.
 ★★★



Anthony Hopkins suffers hunger pangs in 'Hannibal.'

Oldman making Verger a compelling weirdo. "Hannibal" must be considered a success if only because it's not too great a disappointment.

A heady mix of politics and provocative, **LIVE NUDE GIRLS UNITE!** documents a Jewish lesbian's effort to unionize a San Francisco peepshow while trying to keep her mother from learning what she does for a living. Julia Query, who co-directed with Vicky Funari, guides us amiably through her life, which also serves as fodder for her stand-up act in a queer cabaret.

Raised in a liberal New York household, Julia moved to San Francisco and became involved in the sex industry, writhing at a peepshow, the Lusty Lady, which had better working conditions than most but still exploited its workers.

"I wondered why I could tell my mom I was gay but not a stripper," Julia says; but she finally comes out during the months of negotiations for a union contract. Her being a lesbian is no more an issue than it is a secret.

In addition to more humor than the average documentary about labor conflicts, "Live Nude Girls Unite!" includes more—well, live nude girls; but the nudity is often casual and more artistic than exploitative. Query's involvement in the story ensured that the camera was always in the right place at the right time.

Equally importantly, Query, Funari and their crew knew how to assemble the footage they got in a way that's amusing, entertaining, informative and provocative.

INFO
'Live Nude Girls Unite!'
 Directed by Julia Query & Vicky Funari
 Starring Julia Query, Dr. Joyce Wallace
Queer Quotient: More feminist than lesbian, but writer-producer-director-star Query is out and proud.
 ★★★

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saturday, february 17

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 Dignity mass, 7:30 p.m. for gay Catholics. 713-880-2872.
 St. Stephen's Episcopal Church, Rosary 8 a.m. 1805 W. Alabama. 713-528-6665.
 Houston Cbain Gang Bicycle Club. Call for ride locations. 713-863-1860.
 Houston Wrestling Club, Practice. 1:30 p.m. 713-453-7406.
 Rainbow Fishing Club, Meeting. 713-526-7070.
 Houston Faerie Circle, Meeting. 2 p.m. 713-533-0150.
 Northwoods AIDS Coalition Food Pantry Southwest Center. 10 a.m. to 2 p.m. 281-633-2555 & Conroe 936-441-1614.
 CPR Classes. Noon. 713-607-7700.
 Houston Gay & Lesbian Community Center Drop-in hours noon to 4 p.m. • Gay Broadcast Network rehearsals. Noon. • Positive Art Workshop Photography exhibition. 803 Hawthorne. 713-528-3818.
 Asians & Friends. Pot Luck dinner & Game night. 713-626-6300.
 Center for AIDS. "Probing HIV's Elusive Activities Within the Cell Host." 713-527-8219.
 Psychic Fair and Health Expo. 10 a.m. 713-932-7224.
 Houston Outdoor Group. Memorial Park Walk. 281-437-0636.
 Houston Area Bears. Social at Mary's. 713-867-9123.
 Classic Chassis Car Club. Winter Beach Party. 713-797-8615.

sunday, february 18

Houston Area Teen Coalition of Homosexuals meets. 713-942-7002.
 Rainbow Riders. A bicycle club for women. 713-869-1686.
 St. Stephen's Episcopal Church. Holy Rite Eucharist I 7:45 a.m.; Holy Rite Eucharist II 8:55 a.m.; Education hour 10 a.m.; Choral Eucharist 11 a.m. 713-528-6665.
 Maranatha Fellowship Metropolitan Church. Service. 6:30 p.m. 713-528-6756.
 Resurrection MCC. Services. 9 a.m. and 11 a.m. Adult Sunday School 10 a.m. Youth Sunday School 11:15 a.m. Handbell Choir rehearsal 1:30 p.m. 713-861-9149.
 Grace Lutheran Church. Sunday school for all ages 9 a.m. Service 10:30 a.m. 713-528-3269.
 Community Gospel. Service at 11 a.m. & 7 p.m. Sunday School for children 10 a.m. 713-880-9235 or www.communitygospel.org.
 Houston Mission Church. Service 10:30 a.m. 713-529-8225.
 Covenant Church, Ecumenical, Liberal Baptist. Service 9:30 a.m. & education hour 11 a.m. 713-668-8830.
 Bering Memorial United Methodist Church. Services at 8:30 a.m. & 10:50 a.m. Sunday school 9:45 a.m. 713-526-1017.
 The Women's Group. Meeting & Discussion. 10:45 a.m. 713-529-8571.

Unitarian Fellowship of Galveston County. 502 Church St. Service 10:30 a.m. 409-765-8330.
 First Congregational Church (Memorial). Service at 10 a.m. Christian Education. 11:30 p.m. 713-468-9543 or fcc-houston.org.
 Unitarian Fellowship of Houston. Adult forum 10 a.m. Service 11 a.m. 713-686-5876.
 Gay Catholics of St. Anne's-Houston. 5 p.m. worship service. Dinner and social. alexcam@wt.net. 713-623-0930
 Thoreau Unitarian Universalist Congregation: Adult discussion 9:45 a.m. Service 11 a.m. 281-277-8882. www.tuuc.org.
 First Unitarian Universalist Church. Services at 9:30 & 11:30 a.m. Brunch available 10:30 a.m. Panel Discussion: Bisexuality. 1:30 p.m. 713-526-5200. church@firstuu.org.
 Houston Tennis Club. 9 a.m. Memorial Park at the Tennis Center. 713-692-2703.
 Houston Gay & Lesbian Community Center Drop-in hours 2 to 4 p.m. • Justice Rainbow. Meeting and pot luck. 6 p.m. • Positive Art Workshop Photography exhibition. 803 Hawthorne. 713-524-3418.
 PFLAG-Woodlands & PFLAG-Galveston. 2 p.m. 713-867-9020.

monday, february 19

Gay Fathers/Fathers First. Support group. 8 p.m. www.GayFathers-Houston.org or 281-505-1788.
 Frost Eye Clinic. Free eye exams for people with HIV. 713-830-3000.
 HIV testing, STD Exams & treatment. Free. AVES. 1 p.m. to 6:15 p.m. 713-626-2837.
 Kolbe Project. Eucharist 7:30 p.m. 713-861-1800.
 Northwoods AIDS Coalition Food Pantry Open. 10 a.m. to 6 p.m. 936-441-1614.
 Houston Tennis Club. 9 a.m. Memorial Park at the Tennis Center. 713-692-2703.
 Lesbian & Gay Voices Radio Show. 8 to 10 p.m. KPFT 90.1. 713-529-1223.
 AIDS Mastery. 7 p.m. Montrose Counseling Center. 713-529-0037.
 Grief & Divorce Support Groups. 7 p.m. Bering. 713-526-1017, Ext. 208.
 gayDAR. Wellness community. Support Group. 7 p.m. 713-526-1017, Ext. 211.
 Houston Lesbian and Gay Community Center drop-in hours from 6 to 9 p.m. Positive Art Workshop Photography exhibition • 803 Hawthorne. 713-524-3818.

tuesday, february 20

For Mature Audiences Only. Support group. 7 p.m. Bering Memorial UMC. 713-526-1017.
 Free HIV Testing by the Montrose Clinic. 8 p.m. to midnight. Club Houston. 713-830-3000.
 Helping Cross Dressers Anonymous. Support Group. 7 p.m. 713-524-0439.

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Classifieds

Announcements

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Gay & Lesbian Breakfast Club now forming • Walk Memorial Park 8:00 AM every Saturday morning • 3 Mile track • then head to breakfast at Hava Hava Cafe at 911 11th Street • Call 713.861.9149 or see our website: <http://members.aol.com/morningclub/index.htm>

Youth Empowerment Advocates of Houston, an outreach center for homeless youth, is seeking the following donations: clothing, hygiene supplies, towels, books, videos and backpacks • Call Andrea 713.523.9324

Bill O'Rourke (AKA Daddy Blade) has moved, but his phone number remains the same: 713.864.2233 • Now near St. Thomas Clinic

The Spay & Neuter Assistance Program (SNAP) will provide FREE spaying, neutering, rabies vaccination and Houston city license for animals belonging to qualifying low income dog & cat guardians • Call 713.522.2337 for qualifications, locations or more information.

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Volunteers needed for research study using hand-held computer at the University of Texas M.D. Anderson Cancer Center. Free nicotine patches! Call 713-792-2265

BAY AREA GAYS

Is a new social group in the greater Clear Lake area for "young-ish" gay men (ages 20-40) • Call 281.488.0537

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Employment

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Occasions

Birthdays

CCCC members Jim P. (2/16) and Kim L. (2/21) motor in happy birthdays this week.

Asians & Friends members Bill R. (2/17) and Lynett E. (2/21) open their birthday fortune cookies this week.

Kevin M. of the Houston Area Bears is looking for a big bear hug on his Feb. 18 birthday.

Kool Kat Kyle kisses in his birthday on Feb. 21.

Party animal and all-around great guy Allan Nelson of Kinetic Sport pumps it up for his Feb. 22 birthday.

Anniversaries

Wild Bill Eason and Stephen Parker celebrate seven years together on Feb. 19.



Lovable and cuddly Pooh Bear smiles in a birthday on Feb. 22.



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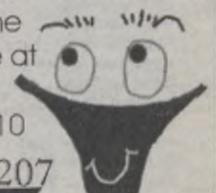
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My Stars!

by JILL DEARMAN

YOUR WEEKLY HOROSCOPE

February 16 - 22



ARIES (MARCH 21—APRIL 20)

Take a small step in the direction of someone who really digs you. Your heart may not be convinced yet, but just give it time. As the Sun moves into the most psychic and spiritual sector of your chart, you have to face some emotional realities. Deal with it, and the magic will come a little bit later—perhaps in the form of a Leo.

TAURUS (APRIL 21—MAY 20)

You may feel as if all hope is lost over a career/money plan, but you're wrong. Stop being such a self-defeating masochist and fight for what you want. Someone you thought you could trust may let you down. But, someone who you thought was against you, most likely a Cancer, could stand up for you in a big way.

GEMINI (MAY 21—JUNE 21)

A show of force gets you far in your love life as Mars and Jupiter transit your house of relationships. Optimism wins out over a depressive, "Who cares?" attitude. Start smiling. I said smiling—not smirking. A Sag needs you to steer the ship for awhile. Start paddling!

CANCER (JUNE 22—JULY 22)

Venus at the top of your chart could bring you luck in your career if you concentrate on compromise, darling. You may have to make an important decision about whether to join up with a group or organization that you have mixed feelings about. An Aries, however, is a total ally. And a total animal in bed.

LEO (JULY 23—AUG. 22)

Go forward emotionally in your love life, or you may feel stuck forever. Make all your romantic decisions with care and dignity, darling, and you will get the kind of worship and sexual adoration that you so crave. A Pisces is closer to falling for you than you realize.

VIRGO (AUG. 23—SEPT. 22)

Better to make any decision rather than no decision, dear. I realize a lot of planets are opposing you and making you nervous, but you still have to take care of the basics in your life. Choose a gentle path and don't pick stupid fights with big, mean bullies. Get all fired up about your sex life, instead. A Capricorn is totally burning up for you.

LIBRA (SEPT. 23—OCT. 22)

You may have to go full steam ahead into a conversation that you don't want to have. It's time to put cards on the table and look forward to a time of tension-free living. Seek out comfort in the predictable little things. Your love life could take a most unpredictable and bizarrely exciting turn if you hook up with a Virgo.

SCORPIO (OCT. 23—NOV. 21)

You totally have it in you to be the great artist and spokesperson of your generation that you wanna be, but first you have to take a big step forward. Be a little bit less enigmatic and a little more up front, and the world will turn in your favor that much quicker. Forget the pundits, but do listen to a smart and sexy Gemini.

SAGITTARIUS (NOV. 22—DEC. 21)

Competition is good for your spirit, in business and in your love life, sweetie. People can see right through you on the work front, and that only makes them trust you more. Let a Taurus tell you with words and kisses how perfect you are—because you are, baby.

CAPRICORN (DEC. 22—JAN. 19)

You need to look towards the future and make a better plan for your career. Be a little cautious and greedy where money is concerned while Uranus in your house of finances is squaring Saturn (your ruler). A Scorpio wants your body and your heart, not your wallet and your investment portfolio.

AQUARIUS (JAN. 20—FEB. 18)

If old lovers come home to roost, please, babe, send them packing. This is the time to put old ghosts behind you. Mars is making a sweet sextile to Neptune in your sign, which could bring you sexual inspiration. Shower that physical love on a fellow Aquarius.

PISCES (FEB. 19—MARCH 20)

If you do something totally illogical and foolish, it just might turn out in your favor during this lucky Piscean cycle. The Sun in your sign (beginning Feb. 19) could bring you the confidence boost you really need, honey. Play it cool, and then release your heat with a Libra.

Jill Dearman is the author of "Queer Astrology for Men" and "Queer Astrology for Women." For information on charts and consultations, call 212-841-0177 or e-mail QScopes@aol.com.

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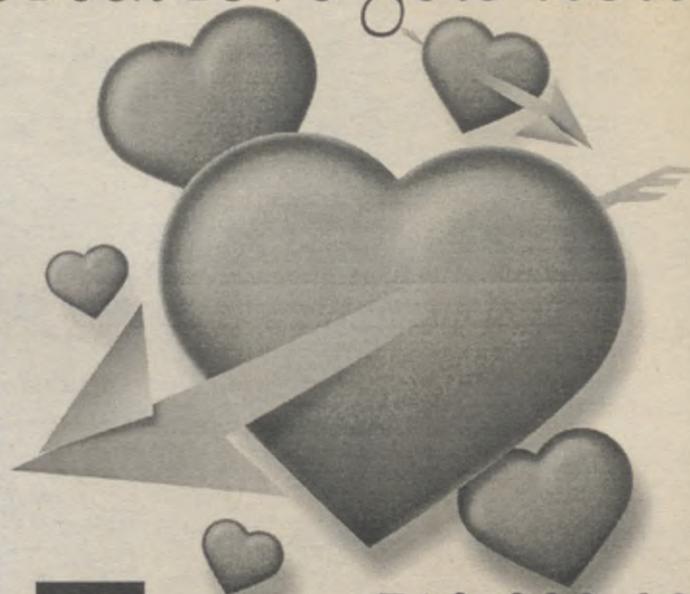
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