Rolf Petherbridge

ACON President 1990 - 1991

1) What impact did ACON have on the lives of GLBT people and people affected by HIV/AIDS during your time as president/CEO?

My presidency was close to the peak impact of the epidemic. As an organisation ACON was overtly working to mitigate the various distresses and towards an avoidance of them i.e. a cure. Somewhat less overtly it was working to protect a libertarian gay lifestyle against an ominous right-wing backlash. The strategies employed were many and successes considerable.

2) What were the greatest challenges that ACON had to face during your time as president/CEO?

I feel unable to properly answer this question as I don't properly remember which challenges occurred when in a long period of intense engagement. One thing I remember the organisation was worried about and which I am pretty sure did coincide with my presidency was a change of state government from Labor to Liberal and we were I think all worried that that might result in a withdrawal of support or funding or influence. These fears were largely unfounded.

3) What were ACON's greatest achievements during your time as president/CEO?

In my estimation, the greatest achievement which occurred (or at least began) during my presidency, and for which I was considerably responsible, was the comprehensive overhaul of the Australian drug regulatory system.

4) What was it like working at ACON during your time as president/CEO?

Intense, stimulating and exhausting. But what is probably difficult for those who weren't there to understand is how much like being at war it was. Dealing with death and decline was an almost daily challenge. For many, the normal emotions were an indulgence one could not allow oneself. One just had to push on. To illustrate the extremity I give two personal examples:- 1. I went to Washington for an FDA workshop and was away two weeks. While I was away four close friends died. 2. I represented HIV+ve's on CTTAC for seven years. In this forum I was up against an array of medical professors. At a few meetings I had said that I reckoned I must have lost a hundred friends and colleagues to the virus. After one meeting I became concerned that I might have been exaggerating so that night I sat down and made a list. There were 180 on it and that wasn't near the end. I didn't keep a running tally thereafter but the total would be well past 200. If we aren't each suffering Post-traumatic Stress Syndrome we are each entitled to. In this regard I might suggest that somewhere in this exercise you might compile and publish an "ACON Honour Board" of our fallen soldiers.

5) What is your favourite 'ACON moment'?

To give an answer which is the most personal rather than cooperative: Ddc was the second drug to demonstrate efficacy and trials were showing the benefits of combination therapy.
Many who had enjoyed some benefit from AZT had exhausted its benefit. We had initially been told by Roche, Ddc's developer, that we (Australia) would be getting access to the drug at the same time and under the same conditions as the US. Through a personal contact I won't reveal, I learned very reliably that Roche top management in Switzerland had decided there would be no early access offered in Australia. I was able to get the fax number of the head of Roche Clinical Research and that night sent the most outrageously threatening fax demanding compassionate access. In less than 12 hours I had a reply promising drug access within the week.