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Correspondence - Sandra L. Thurman - Outgoing - 5/98 [1]

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. letter	John Roberts to President Clinton re: Cures (Personal) [partial] (2 pages)	03/25/1998	b(6)
002a. form	re: Data entry form (Personal) (1 page)	05/28/1998	b(6)
002b. letter	Sandra Thurman to Inmate re: Cures (Personal) [partial] (1 page)	04/24/1998	b(6)
002c. letters	Inmate to Sandra Thurman re: Cures (Personal) (includes supporting documentation) (6 pages)	05/20/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19399

FOLDER TITLE:

Correspondence - Sandra L. Thurman - Outgoing - 5/98 [1]

2018-0764-F

jm2106

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
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- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
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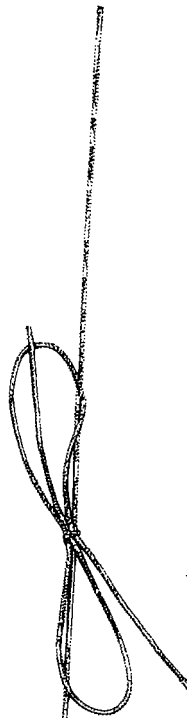
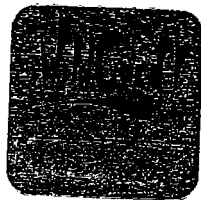
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

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Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

PAPER TROUPE
LIMITED





RICHARD W. EASTMAN

My pager number is:
(213) 917-6517

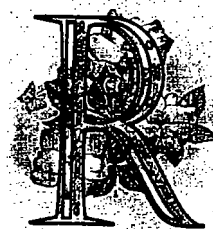
HOME #

213-661-1720



1. Dial the pager number
2. Wait for 3 beeps
3. Enter your telephone number
4. Hang up

→ THIS MEDICINE REALLY
HELPS ME & THOUSANDS OF
OTHER SICK PEOPLE IN CALIF.
AS YOU KNOW PROP. #215 WAS
PASSED WITH A LARGE MARGIN!
OF CONCERNED VOTERS IN CALIF.
TO HELP PEOPLE LIKE ME!
I KNOW YOU CARE & MANY
OTHERS DO IN WASHINGTON!
SO PLEASE HELP ME & OTHERS
IN CALIF. TO FIND A WAY TO
MAKE CHANGES IN WASHINGTON!
PLEASE WRITE SOON! THANK YOU!
RICHARD W. EASTMAN



5/15/98

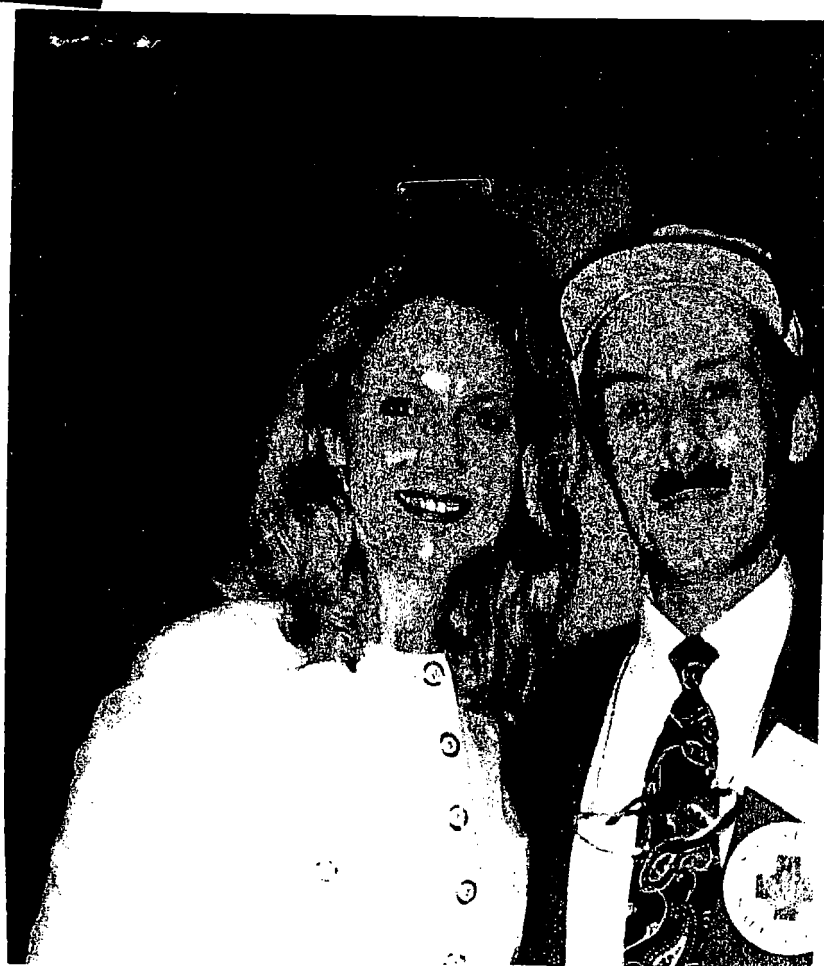
HOLLYWOOD
CALIF.
U.S.A

DEAR SANDY THURMAN:

THANK YOU AGAIN, FOR
YOUR TIME, TO SEE ME
IN WASHINGTON LAST WEEK.
HOPE THE INFO. I GAVE
YOU WILL HELP YOU & OTHERS
TO UNDERSTAND WHAT'S GOING
ON IN L.A. MED/MARIJ. MOVEMENT
PROP. #215
"I" WOULD LIKE TO COME BACK
TO D.C. TO TALK WITH YOU,
AND OTHERS CONCERNED, AS
SOON AS POSSIBLE

CLINTON LIBRARY PHOTOCOPY





THE WHITE HOUSE
WASHINGTON

May 29, 1998

John S. Roberts
Post Office Box H
Hobart, Indiana 46342

Dear Mr. Roberts:

Thank you for your letter regarding the current state of HIV and AIDS.

I assure you that this Administration has been and will continue to be committed to combating the HIV/AIDS epidemic in this country and across the world. As you well know, far too many Americans become infected with the HIV virus every year and we are working harder than ever to find a cure.

I personally thank you for your own commitment to help stem this epidemic.

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra L. Thurman", with a stylized flourish at the end.

Sandra L. Thurman

Director

Office of National AIDS Policy

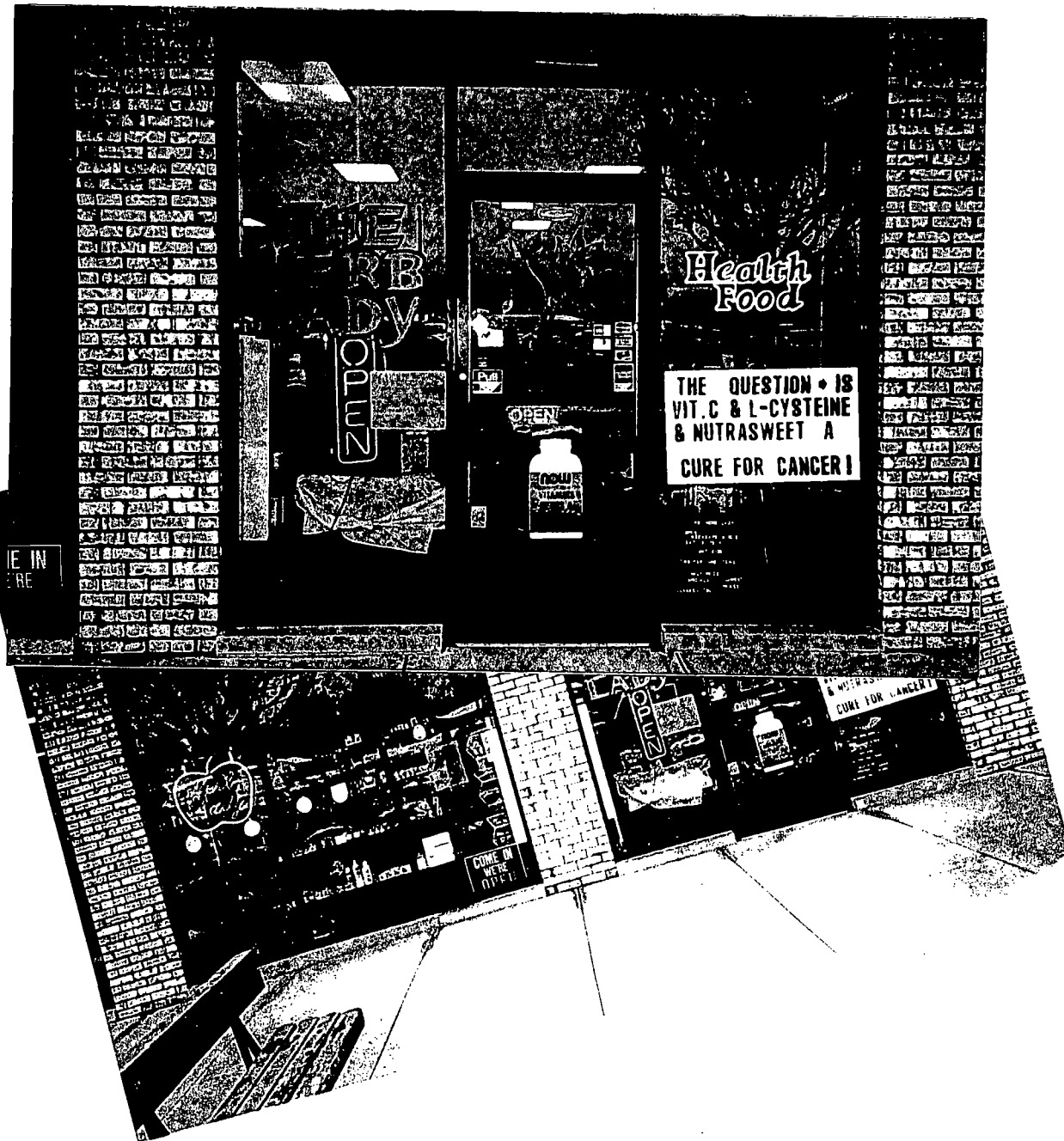
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2 pgs



March 25, 1998

President Clinton
Attention:
Sandra Thurman
Director
National Aids Policy Office
200 Independence Ave., S.W.
Room 736 G
Washington, D.C. 20201

Richard G. Lugar
United States Senator
United States Senate
306 Hart Senate Office
Building
Washington, D.C. 20510

David Satcher, M.D., Ph.D.
Surgeon General
Parklawn Building
5600 Fishers Lane
Room 18-66
Rockville, Maryland 20857

Dear President Clinton (Ms. Thurman), Senator Lugar and Dr. Satcher,
Last Saturday I mailed to all of you a packet of my research.
At this time I have attached three letters from that packet -

1. To Dr. Varmus
2. To Dr. Bader
3. 'To Everyone'.

I wish to amend the 'To Everyone' letter thusly:

" However, today I await the replies of the Surgeon General of the
United States of America and the Director of the National Aids Policy Office.
I shall not accept the responses of anyone else on the face of the earth
unless it is the President of the United States of America."

I shall deal no further with the National Institutes of Health other than to issue
orders to it through the auspices of your offices, again, namely - The Surgeon General
of the United States of America and The Director of National Aids Policy.

First, let's deal with cancer.

My 'To Everyone' letter was wrong in that 'Zaloda' is spelled 'Xeloda', and it
apparently does not contain Thiazolidine-4-carboxylic acid.

The attached four pages entitled, 'Drug for advanced breast cancer gets cautious OK',
come from 'The Internet'.

After reading this article I just wanted to YELL OUT -

HEY EVERYBODY, DON'T YOU ALL REALIZE THAT A SUCCESSFUL CANCER CLINICAL TRIAL
ALREADY HAS BEEN DONE!!!!

It is described on pages 68-69-70 of my 116 pages which I here in include; as you
see the title of this research is AIDS, CANCER, ALCOHOL/SMOKING ABUSE and the
Power of NAC (N-Acetyl Cysteine).

These passages are from the 'Xeloda' study -

"Xeloda, a pill form of the chemical capecitabine, does not claim to be a cure,
and scientists are not even sure how good it is as a stopgap therapy." Page 1

"Still, the panel concluded that a pill women could take at home - with possibly
fewer side effects than typical chemotherapy - was worth chancing." Page 2

" 'These patients often lack IV (intravenous) access' for chemotherapy
because their veins have already been so poked and prodded, said
Dr. Kim Margolin of City Hope National Medical Center. 'Something oral...
is definitely welcome.'"

Now, let's just see what's said within pages 68-70 of my research:

Page 68 - "Thiazolidine-4-carboxylic acid (thioprolin, 'norgamem'*) a compound found to act on the cell membrane of tumour cells, causing reverse transformation to normal cells was investigated in patients with advanced cancer. Responses were obtained at several dose levels mainly in epidermoid carcinoma of the head and neck with pulmonary metastases. Histological studies showed involution and transformation into low-grade malignancies and disappearance of evidence of cancer."

Page 69 - " No toxicity was observed and all regimens were equally well tolerated. Most patients had a feeling of well-being and there was no nausea, vomiting, myelo-depression, or central-nervous-system symptoms. No changes in pulmonary, cardiac, hepatic, or renal functions were found..."
(The Xeloda article states this on its page 3: "The main side effects were diarrhea and a syndrome that left some patients' hands and feet numb and swollen, occasionally causing more extensive damage. The side effects seemed to abate with lower doses.")

Page 69 - " Thioprolin seemed to be completely nontoxic over a wide range of doses, and had a considerable antitumour effect in epidermoid carcinoma of the head and neck. Definite signs of activity were observed in epidermoid carcinoma of other regions and in other solid tumours, such as breast, renal, ovary, thyroid, and parotid cancer." (my underline)

Page 70 - " Reverse transformation seemed to affect only tumour cells, since no effect was observed in the normal skin, mucosae, or other epithelial tissues. The selective character of this action explained the absence of toxicity of thioprolin treatment."

Near the end of my letter to Dr. Bader I state:

" Why can't this be done? - Increase the daily oral dosage to 20mg/kg and have the patient ingest, daily, 'mega-doses' of vitamin C.
Also, it might be a good idea to have the patient ingest above average amounts of magnesium, zinc and manganese (page 25)."

Dr. Satcher, would you please order the National Cancer Institute to conduct immediately a clinical trial implementing these measures.

Dr. Satcher, if you do not choose to issue this order, could I please have your reasoning.

If I am right, cancer can be cured with Thiazolidine-4-carboxylic acid which can be administered in oral doses.

* "...The most specific substrate for mitochondrial enzymatic oxidation was thiazolidine-4-carboxylic acid (CF), the product of cys with formaldehyde." Page 61a

* "Thiazolidine derivatives (TD), prodrugs of L-cysteine (cys), synthesized by the condensation of cys with formaldehyde (thiazolidine-4-carboxylic acid), seem to be the most interesting compounds for further studies on anticancer therapy." (j.s.r. underline) Page 13

This acid is an 'aldehyde-thiol' compound; there is a certain 'quirkiness' to the nature of these compounds -

"One of their most striking properties is the ease with which they appear to dissociate into their components, aldehyde and thiol..." Page 61b

"...Because these compounds dissociate so readily, it could be argued that they are some sort of loose molecular compound to which no particular valence formula can be assigned,...." Page 61b

" These aldehyde-thiol compounds, because of their reversible formation and dissociation in neutral aqueous solution at room temperatures, are of some biochemical interest. For example, a thiol like cysteine can be masked in the presence of aldehydes so that, although it can react with reagents such as iodoacetic acid, its presence might not be detected by a nitroprusside test. The effect can also be thought of as a 'buffering' of thiol concentration." Page 61d

"...Finally, at physiological pH the spontaneous condensation of formaldehyde and cysteine to form thiazolidinecarboxylic acid is so rapid (Ratner and Clarke, '37) that when these two compounds are added to mitochondria the metabolism of cysteine is for all practical purposes entirely by way of the thiazolidine (Mackenzie and Harris, '57). The formation of thiazolidinecarboxylic acid 'in vivo' therefore provides a possible mechanism for the detoxification of exogenous and endogenous formaldehyde." P.61e

" All of these acetylated compounds absorb iodine, but do so so slowly that hours are required, whereas the aldehyde addition compounds (I) can be titrated to a sharp end-point in a few minutes." Page 61d

" Cysteine forms easily crystallized condensation products with aldehydes. Some evidence is given that these compounds also dissociate readily, but here again acetylation seems to stabilize the compounds..." Page 61d

Now I wish to focus upon the chemical 'cousin' to Thiazolidine-4-carboxylic acid, namely - 2-Methylthiazolidine-4-carboxylic acid; as you can see from page 17 it is designated 'cough inhibitor'.

See my letter to Dr. Varmus.

What happens when this acid is swallowed?

"...It cannot be assumed, however, that the methyl derivative is metabolized through a pathway similar to that of the parent compound, for when 2-methyl-thiazolidinecarboxylic acid was incubated with liver mitochondria the oxygen uptake was both slower and less extensive, and cystine, not acetylcysteine, was the reaction product. It seems probable from these enzymatic experiments that the methyl derivative is first hydrolyzed to acetaldehyde and cysteine, and that the cysteine is then oxidized to cystine."

Page 43

Both the National Institutes of Health and the Centers for Disease Control have acknowledged that acetaldehyde can inactivate HIV, the virus which causes Aids.

See my page 1.

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OA/Box Number: 19399

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2018-0764-F

jm2106

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Before delving further into HIV/AIDS, I want to return to cancer.

Page 29 - "Chemotherapeutic agents play a major role in the management of various cancers in spite of the frequent severe toxic side effects caused by their nonselective action during systemic administration. One of the approaches aimed at improving the selectivity and reducing the toxicity of anti-tumor agents is drug targeting, which takes advantage of specific receptors for biologically active peptides or macromolecules on the cell membrane of cancerous cells. BN-like peptides have properties of hormones or growth factors and are responsible for a wide variety of receptor-mediated pharmacological effects..."

Page 22 - " I am still searching Medline, but it is my impression that as I write this (October 2) Paper No. 5 represents the first time in the history of medicine wherein formaldehyde is mentioned as a possibly useful adjunct in the treatment of cancer."

(b)(6)

Formaldehyde is less toxic than Tylenol; page 11:

[001]

" Do I read this correctly? Tylenol (Acetaminophen) is potentially the most poisonous of the four?"

Page 61j - "Cancer - a procedure which requires 'pure' formaldehyde:

1. Everyday an above average amount of zinc, manganese and/or magnesium will be included in the diet of the patient.
2. Everyday an above average (mega-doses) of vitamin C and B₁ will be included in the diet of the patient.
3. Everyday, upon awakening, the patient will swallow a 600 mg. capsule of NAC.
- * 4. Everynight, $\frac{1}{2}$ to 1 hour before going to bed, the patient will swallow another 600 mg. capsule of NAC.
- * 5. After this time has lapsed, the patient will drink a large glass of orange juice containing 'pure' formaldehyde in the amount of 1/30ml/70kg.

The expectation is that this formaldehyde will complex with L-cysteine in the body to form thiazolidine-4-carboxylic acid (Tac);..."

Page 38 - "Let's focus upon cancer again and ponder what weapon Tac affords us in attacking it.

Refer to my page 25 in which I underlined hydrophobic environment and page 28 in which I quoted:

'...Tac is a closed ring analog of Met and is more hydrophobic than Met...'

* It might be better to use L-cysteine. March 27, 1998, 4:45 A.M.

"When I read this at 5:30 a.m. on October 1 it occurred to me how cancer (at least certain kinds) could be cured.
The 2nd definition of 'hydrophobic' in Webster's New World Dictionary, 2nd Edition, page 688 states:

'2. not capable of uniting with or absorbing water...'

Is this the key to the whole thing? - Tac will attach itself to a cancer cell in such a manner that the cancer cell will be unable to take in water. What happens to any living thing deprived of water? It shrinks up and dies, does it not? This is what I think will happen to cancer cells if Tac flows in the bloodstream - they will shrivel up and die. It's as simple as that."

And this is why there might be a need for above average amounts of magnesium, zinc and manganese in the diet of a cancer patient, Page 25:

" Recently, a number of newly discovered antitumor antibiotics have been found to contain extensive oligosaccharide moieties that may play an important role in DNA binding. NMR and x-ray crystallographic studies showed that chromomycin, containing a disaccharide and a trisaccharide unit, is preorganized into a dimer (mediated by a magnesium ion) and bound to the minor groove of DNA in a distorted A-DNA conformation..."
Abstract No. 88098591, 'Distribution of electric charges in 2 substances inducing tumor cell regression', reads:

'The charge distribution of anti-cancer molecules 4-thiazolidine-carboxylic acid and 2-amino-2-thiazoline hydrochloride was calculated with a CNDO/2 semiempirical quantum mechanic method. The activity seems to be related with the formation of Zn²⁺ and Mn²⁺ ions. Both molecules show local isosterism, origin of their chelating properties.'"

And let's never forget - the epoch research of Dr. Herbert Sprince has shown that vitamin C affords generous protection against a lethal dosage of formaldehyde.

There you have it - Thiazolidine-4-carboxylic acid & vitamin C & magnesium & zinc & manganese - a possible cure for cancer.

Dr. Satcher, again, I wish to request of you that you order the National Cancer Institute to initiate a clinical trial to test out my hypothesis.

Dr. Satcher, if you do not choose to issue this order, could I please have your reasoning.

(b)(6)

Now, let's get back to HIV/AIDS.

Pages 90 and 91 reflect the results of two research studies conducted by three Japanese scientists. The chemical compound utilized in both studies contains a form of acetaldehyde - diethylacetal.

On page 61 I noted the fact that these

"...are the only two articles in existence in which the letter sequences A C E T A L & H I V are contained together."

The chemical utilized, N-myristoyl glycinal diethylacetal, had a devastating effect upon HIV's 'gag' proteins, namely - p17, p41 & Pr55.

I wish to quote my page 3, at the bottom:

" Both the National Institutes of Health and the Centers for Disease Control have acknowledged that acetaldehyde can inactivate HIV, the virus which causes

AIDS."

Acetaldehyde is the one $\frac{1}{2}$ of 2-Methylthiazolidine-4-carboxylic acid; the other $\frac{1}{2}$ is L-cysteine; this acid is abbreviated 'L-MTCA' or 'MTCA'.

What if an Aids patient swallowed MTCA?

Would it break in two and combine again?; would it break in two and combine again?; would it break in two and combine again?; would it break.....

Near the bottom of my page 3 I quoted:

"...It seems probable from these enzymatic experiments that the methyl derivative is first hydrolyzed to acetaldehyde and cysteine, and that the cysteine is then oxidized to cystine."

However, it must somehow quickly re-combine. If it simply dissolved into its two components - acetaldehyde and L-cysteine - the acetaldehyde $\frac{1}{2}$ would be quickly metabolized by the liver.

Then a result like this could not be produced, could it? The chemical employed was Methylthiazolidine-4-carboxylate not 2-Methylthiazolidine-4-carboxylic acid; however, I assume the acid would derive a like effect:

"...Treatment of T-2- intoxicated mice with MTCA (750 mg kg-1, i.p.) not only maintained glutathione content at control levels or higher but significantly improved survival as well. Therefore, the toxicity and lethality of T-2 toxin may be associated with decreased hepatic glutathione content, since MTCA maintained glutathione content and improved survival." Page 21

Other research reveals this about a 'relative' of MTCA - NMTCa - N-nitroso-2-methylthiazolidine-4-carboxylic acid (NMTCa):

" Up to 95% of NTCA and NMTCa given orally to fasted rats was recovered as such in urine and faeces within 2 days..." Page 19

However, as it flows through the body MTCA has got to divide doesn't it? Elsewise, how would it have been effective as a 'cough inhibitor'.

I am going to assume that it does divide into 1. L-cysteine 2. Acetaldehyde and then somehow, swiftly and inexplicably combines again into MTCA.

Acetaldehyde inactivates HIV.

Acetaldehyde's 'cousin', to repeat, is formaldehyde. Formaldehyde combines with L-cysteine to form Thiazolidine-4-carboxylic acid; this acid is also called 'Thioprolin'. Guess what? Thioprolin has already shown 'potent antiviral activity', Page 20:

" No. 96173007 is entitled 'Structure of HIV-1 protease with KNI-272, a tight-binding transition-state analog containing allophenylnorstatine' and states in part:

'...One such compound, KNI-272, which incorporates allophenylnorstatine (Apns) - thioprolin (Thp) in place of Phe-Pro, has potent antiviral activity and is undergoing clinical trials.'

By the way, the two sentences before this one read as follows:

'BACKGROUND: HIV-1 protease (HIV PR), an aspartic protease, cleaves Phe-Pro bonds in the Gag and Gag-Pol viral polyproteins. Substrate-based peptide mimics constitute a major class of inhibitors of HIV PR presently being developed for AIDS treatment.'

Could L-MTCA be even more potent than Thioprolin and afford us a 4 pronged attack against HIV by -

- "1. Elevating glutathione levels (GSH)
2. Restoring apoptosis
3. Cause the antimyristoylation of HIV's gag proteins by preventing covalent binding?
4. Serve as a protease inhibitor?" Page 20

Isn't it worth a clinical trial to see what might be the effect upon HIV which this 'cough inhibitor' could have?

Ms. Thurman and Dr. Satcher, would please order the National Institutes of Health to initiate immediately such a clinical trial.

Ms. Thurman and Dr. Satcher, if you choose not to issue this order, could I please have your reasoning.

Wherein lies the power of acetaldehyde and formaldehyde?

Figuratively I like to think - (by the way, to repeat, L-MTCA contains acetaldehyde and Tac contains formaldehyde) -

" If HIV/AIDS is cured by L-MTCA and cancer (at least certain kinds) is cured by Tac, I like to think of thiazolidine as the 'Stagecoach' transporting these chemicals through the body, and something toxic (I am hesitant to say carbon monoxide) would be riding 'Shotgun' doing its damage to those proteins in HIV which wish to myristoylate and those cells which wish to turn cancerous." Page 38

However, the truth is even more fascinating, is it not? As you read the following, keep in mind that acetaldehyde and formaldehyde are aldehydes:

"THE GROUP CHO WHICH IS TO BE FOUND IN ALL ALDEHYDES CONTAINS THE MOST ACTIVE FORM OF THE CARBONYL RADICAL, CO, KNOWN TO CHEMISTS, AND IT IS TO THE INTENSE REACTIVITY OF THIS RADICAL THAT THE ALDEHYDES OWE THEIR IMPORTANCE AS ORGANIC SYNTHETIC AGENTS BOTH IN NATURE AND IN THE CHEMICAL LABORATORY." P. 36

And this is the key to the whole thing, is it not? - (the word to remember is carbonyl) -

"...The carbonyl group can enter into a wide variety of chemical reactions; nucleophilic reagents (electron-rich reagents) can readily attack the positively charged carbon atom whereas electrophilic reagents (electron-seeking reagents) can readily attack the negatively charged oxygen atom." P. 36

Now, let's look at the problem of alcoholism. In my March 18, 1998 letter to Susan Powter, which I included in my packet, I said:

" If I were Surgeon General I would warn the public that the ingestion of alcohol 'soaks up' certain vitamins and minerals in the body and, to ward off the possibility of the development of full-time alcoholism, it might be a good idea for drinkers to include above average amounts of these nutrients in their diets -

- A. Zinc
- B. Vitamin B₆
- C. Glutamine
- D. Glutathione

Susan, thanks again for the inspiration of your book; it made me aware of 'C.' & 'D.'."

Again, the title of Susan's book is SOBER...And Staying That Way, and everyone who has 'a problem' with alcohol should be aware of it.

Ms. Thurman and Dr. Satcher, have I discovered the cures for cancer and Aids and full-time alcoholism?

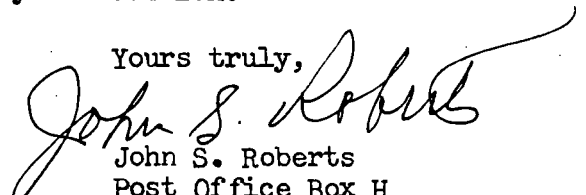
About cancer and Aids - the decision is yours. A clinical trial of four months should yield the results.

About full-time alcoholism, I don't yet know. However, I wish to repeat - a person's health is at risk if alcohol is ingested, and the aforementioned nutrients are lacking or in low supply in the body.

Alcohol is the most intensely addictive drug known to man.

And in conclusion, Ms. Thurman and Dr. Satcher, I wish to repeat again - If you do not order the National Cancer Institute and the National Institutes of Health to implement immediately clinical trials to test my ideas about cures for cancer and Aids, I would appreciate receiving the reasoning behind your decision.

Yours truly,


John S. Roberts
Post Office Box H
Hobart, Indiana 46342
219-763-1933

Copy to Susan Powter

March 12, 1998

Harold Varmus, M.D.
Director, National Institutes of Health
Building 1, Room 126
Bethesda, Maryland 20892

Dear Dr. Varmus,

In response to Senator Lugar's office, Jack Whitescarver, Ph.D., Acting Director, Office of Aids Research, National Institutes of Health, recently stated:

"If Mr. Roberts is interested in submitting an application, he may request one from the NIH Center for Scientific Review, 6701 Rockledge Drive, Room 1040, MSC 7710, Bethesda, MD 20892. Additional information also is available through the NIH Internet Web site: www.nih.gov/grants."

Dr. Varmus, throughout 1993 I suggested to the National Institutes of Health (NIH) that it explore the possibilities of acetaldehyde as an anti-HIV agent. Throughout 1993 the NIH told me that:

"...Acetaldehyde is a normal metabolite of the human body that would not significantly hinder HIV infection."

"...To date, the NIH has not identified any compelling data or a convincing rationale to pursue acetaldehyde as an anti-HIV agent..."

However, because of my persistence and perseverance, the NIH re-evaluated acetaldehyde.

This was the finding in December, 1994 -

"The known toxicity of acetaldehyde would have likely prevented evaluation even if the agent had shown anti-HIV activity in the Drug Screen Program sponsored by the National Cancer Institute..."

This was the finding in August, 1995 -

"The fact that acetaldehyde inactivates the human immunodeficiency virus (HIV) in test tube experiments does not necessarily make it a good candidate for anti-HIV therapy in humans. There are many agents known to be active against HIV. Researchers at the National Cancer Institute have identified over 3,000 compounds that are active against HIV, and the NIH currently is developing and evaluating the most promising ones."

I can understand the NIH's not wanting to utilize acetaldehyde because of its toxicity; I can appreciate this.

However, my research has revealed that acetaldehyde has been combined with L-cysteine to form a 'cough inhibitor'.

Previously I mailed to you 116 pages of my research; if you did not receive it, let me know.

On page 17, Chemical Abstract 77242v describes it; its chemical name is

2-Methylthiazolidine-4-carboxylic acid.

To repeat, this acid is composed of two compounds -

1. L-cysteine
2. Acetaldehyde

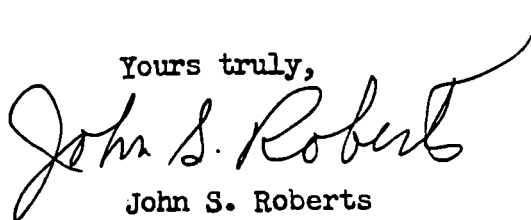
I am presently trying to interest your colleague, Dr. John P. Bader, in utilizing this acid's chemical 'cousin', Thiazolidine-4-carboxylic acid, as a cure for cancer. This acid also is composed of two compounds -

1. L-cysteine
2. Formaldehyde.

Dr. Varmus, do you think it would be worthwhile to see if this 'cough inhibitor' might be effective in inactivating HIV?

If you think that my idea is not worth a clinical trial, could I please have your reasoning?

Yours truly,



John S. Roberts
Post Office Box H
Hobart, Indiana 46342
219-763-1933

Copies to

President Clinton, Attention: Sandra Thurman,
Director, National Aids Policy Office
Susan Powter
Senator Richard G. Lugar, Indiana
David Satcher, M.D., Ph.D., Surgeon General

Post Script: Dr. Varmus, upon reflection I would prefer that you would direct your response to Surgeon General Satcher and mail to me a copy. j.s.r.

March 12, 1998

John P. Bader, Ph.D.
Chief, Antiviral Evaluations Branch
Developmental Therapeutics Program
Division of Cancer Treatment
National Institutes of Health
National Cancer Institute
Bethesda, Maryland 20892

Dear Dr. Bader,

In the past I wrote to you about HIV/AIDS.

Today, I write to you about cancer.

Included in this envelope is 116 pages of my research and one letter.

I realize that things seem somewhat disjointed, and I hope 'to tie things together' with this letter.

Page 68, 69 & 70 are from 'The Lancet'. They seem to indicate that cancer can be cured. The study took place in Spain.

It is my hope that this study could be done again; however, this time, increase the oral dosage of Thiazolidine-4-carboxylic acid from 5mg/kg daily to 20mg/kg daily.

The date of 'The Lancet' article is January 12, 1980.

My pages 71 & 74 show where this acid, also known as 'Tac', is part of a compound which seems to be getting some results in the cure for cancer.

The dates of the articles reporting this research is November 25, 1996 and August 25, 1994, respectively.

This more current research did not include in its bibliographies any mention of the Spanish study.

Could it be that the researchers working in the 90s were unaware of the very positive results achieved by the Spanish study?

These statements are made in that study; the acid is also called 'Thioprolin':

" Thioprolin seemed to be completely nontoxic over a wide range of doses, and had a considerable antitumour effect in epidermoid carcinoma of the head and neck. Definite signs of activity were observed in epidermoid carcinoma of other regions and in other solid tumours, such as breast, renal, ovary, thyroid, and parotid cancer."

" ...Histological studies showed involution and transformation into low-grade malignancies and disappearance of evidence of cancer."

How were these cancers cured?

On page 38 I stated:

" Is this the key to the whole thing? - Tac will attach itself to a cancer cell in such a manner that the cancer cell will be unable to take in water. What happens to any living thing deprived of water? It shrinks up and dies, does it not? This is what I think will happen to cancer cells if Tac flows in the bloodstream - they will shrivel up and die. It's as simple as that."

see my

This acid is composed of two compounds (page 8, The Merck Index):

1. L-cysteine
2. Formaldehyde

Formaldehyde, of course, is highly toxic.

If we increased the oral daily dose from 5mg/kg to 20mg/kg, how could we protect the patient against this increased toxicity?

Besides being utilized in the Spanish cancer study, this acid, also known as 'Timonacic' is:

"...used as a choleretic. It has also been used as an adjuvant to the treatment of psoriasis and acne..." Page 40

"...Used as adjuvant in treatment of chronic and acute hepatopathy." Page 40

However, it could be dangerous -

"...As early as 1970, both the Paris and Marseilles Poison Control Center had emphasized the toxicity of this drug which induces convulsions in children subject to overdosage..." Page 37

Of course, we must assume that this was caused by the formaldehyde $\frac{1}{2}$ of the acid. Again, how could we protect the patient against this formaldehyde?

One thing was completely overlooked by the Spanish study - the diet of the patient.

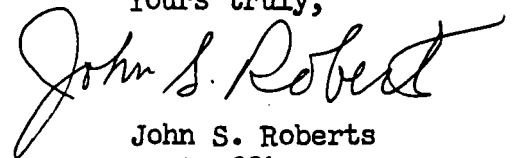
My research has uncovered a fact that is generally not well known - Vitamin C also known as L-ascorbic acid also known as 'LAA' provides protection against the toxicity of formaldehyde; see my February 22, 1998 letter.

Why can't this be done? - Increase the daily oral dosage to 20mg/kg and have the patient ingest, daily, 'mega-doses' of vitamin C.

Also, it might be a good idea to have the patient ingest above average amounts of magnesium, zinc and manganese (page 25).

Dr. Bader, if you think that this hypothesis would not be a fruitful area of inquiry would you please direct your response to Surgeon General Satcher and mail to me a copy. (Let me rephrase that - whatever your response, please direct it to the Surgeon General) and mail to me a copy.

Yours truly,



John S. Roberts
Post Office Box H
Hobart, Indiana 46342
219-763-1933

Copies to

President Clinton, Attention: Sandra Thurman,
Director, National Aids Policy Office
Susan Powter
Senator Richard G. Lugar, Indiana
David Satcher, M.D., Ph.D., Surgeon General
Harold Varmus, M.D., Director,
National Institutes of Health

MARCH 20, 1998

TO EVERYONE,

THE PSYCHE OF MAN IS TRULY AMAZING.

THROUGHOUT THE TWO YEARS (1955-1957)

I WAS IN THE ARMY I WAS NEVER ABLE

TO BOSS AROUND ANYONE.

MY SPIRIT IS THAT OF A BUCK PRIVATE.

HOWEVER, TODAY I AWAIT THE REPLY OF THE
SURGEON GENERAL OF THE UNITED STATES OF AMERICA.

I SHALL NOT ACCEPT THE RESPONSE OF ANYONE
ELSE ON THE FACE OF THE EARTH UNLESS IT IS
THE PRESIDENT OF THE UNITED STATES OF AMERICA.

John S. Roberts

POST SCRIPT TO DR. SATCHER: TODAY ON THE ABC-TV NEWS
AT ABOUT 5:40 P.M. I HEARD THAT THE MEDICINE,
'ZALODA' MIGHT SOON BE UTILIZED TO TREAT WOMEN
WITH ADVANCED CASES OF BREAST CANCER. IF I HEARD
RIGHT, THIS DRUG (OR MEDICINE) SHRINKS OR DRIES UP
THE CANCER. IN FACT, I MAY HAVE HEARD THE
WORD 'CURE' UTILIZED. DR. SATCHER, DOES ZALODA
CONTAIN THIAZOLIDINE-4-CARBOXYLIC ACID?

Drug for advanced breast cancer gets cautious OK

FDA advisory panel says
Xeloda shows promise

March 20, 1998

Web posted at: 10:24 a.m. EDT (1024 GMT)

In this story:

- Xeloda may help when other treatments fail
- Study: Xeloda shrank tumors
- Side effects
- Related stories and sites



The X-ray technique called mammogram screening can detect breast tumors before they can be seen or felt

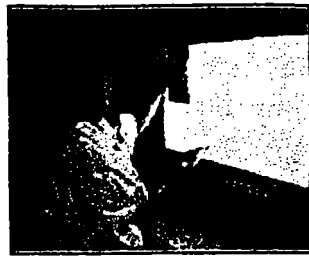
BETHESDA, Maryland (AP) -- Women whose advanced breast cancer has defied existing treatment may soon get an alternative: a drug called Xeloda that promises to help shrink their incurable tumors.

Xeloda, a pill form of the chemical capecitabine, does not claim to be a cure, and scientists are not even sure how good it is as a stopgap therapy.

But advisers to the Food and Drug Administration decided Thursday that it holds enough promise for women with no alternative that it should be made available while manufacturer Hoffman-La Roche hunts for proof of its effectiveness.

"These patients have failed the two very best drugs there are," said Dr. Joyce O'Shaughnessy of Texas Oncology Group, who helped Roche study Xeloda. "This (drug) showed a solid 25 percent response rate in the most resistant population of patients."

But that 25 percent figure was based on a very small study that did not include one of the most basic scientific requirements -- a comparison group -- the FDA advisers cautioned.



Breast cancer is the leading cause of death for U.S. women

(CNN/11/9)

Still, the panel concluded that a pill women could take at home -- with possibly fewer side effects than typical chemotherapy -- was worth chancing.

"These patients often lack IV (intravenous) access" for chemotherapy because their veins have already been so poked and

prodded, said Dr. Kim Margolin of City of Hope National Medical Center. "Something oral ... is definitely welcome."

The FDA is not bound by the panel's advice but typically follows it.

Xeloda may help when other treatments fail

An estimated 44,000 women will die this year of advanced breast cancer that has spread through their bodies. When this cancer metastasizes, these women have two options: the gold-standard Taxol and another class of potent chemotherapy drugs called anthracyclines.

These drugs can come with powerful side effects, not just the hair loss and nausea associated with chemotherapy but even deadly heart toxicity. When they fail, doctors are at a loss as to what to offer women next.

One promising option is continual infusion of a drug called 5FU. Women wear a supply of the drug in a shoulder pack with a line that pumps it straight into a catheter 24 hours a day. One study suggested that 20 percent of these women will respond to the drug.

But the treatment is so arduous that few doctors prescribe it and few women tolerate it for long.

Study: Xeloda shrank tumors

Xeloda is a pill that the body converts into 5FU once it reaches a tumor. It is expected to be less toxic because the enzyme that does the converting is found predominantly, but not exclusively, in tumors.

In a study of 162 patients whose cancer was resistant to Taxol, Roche reported that tumors shrank by half in about 20 percent. Three patients had complete remission.

But more importantly, in 43 patients whose cancer no longer responded to either Taxol or anthracyclines, Xeloda appeared to help shrink tumors in 25 percent of patients.

The effects lasted a median of about five months.

Side effects

The main side effects were diarrhea and a syndrome that left some patients' hands and feet numb and swollen, occasionally causing more extensive damage. The side effects seemed to abate with lower doses.

"You don't benefit just from having your tumor shrink," FDA drug chief Dr. Robert Temple cautioned the panel.

The FDA usually requires cancer drug makers to prove that a drug offers "clinical benefit": longer survival, stalled progression of disease or at least better quality of life. Roche has not yet provided evidence of such benefit.

But the FDA occasionally lets drugs be sold while their makers seek the required proof if those drugs show promise against diseases for which patients have no alternative.

The FDA panel, by a 10-2 vote, recommended this "accelerated approval" of Xeloda for patients who have exhausted other options.

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Special Section:

- [In-Depth Health: Diseases - Cancer](#)

Related stories:

- [Study: U.S. cancer rates declining](#) - March 13, 1998
- [Vaccines show promise against melanoma](#) - March 2, 1998
- [Snakes, smokes enlisted in fight against cancer](#) - February 27, 1998

- New test may help predict recurrence of breast cancer - December 31, 1997
- Researchers: Vaccine may prevent liver cancer - December 8, 1997
- New cancer drug 'something to celebrate on Thanksgiving' - November 26, 1997

Related sites:

Note: Pages will open in a new browser window

- EduCare - Breast Cancer Patient Resources
- American Cancer Society
- Cancer - the journal of the American Cancer Society
- National Cancer Institute
- Food and Drug Administration

External sites are not endorsed by CNN Interactive.



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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002a. form	re: Data entry form (Personal) (1 page)	05/28/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19399

FOLDER TITLE:

Correspondence - Sandra L. Thurman - Outgoing - 5/98 [1]

2018-0764-F

jm2106

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

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b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002b. letter	Sandra Thurman to Inmate re: Cures (Personal) [partial] (1 page)	04/24/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19399

FOLDER TITLE:

Correspondence - Sandra L. Thurman - Outgoing - 5/98 [1]

2018-0764-F

jm2106

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

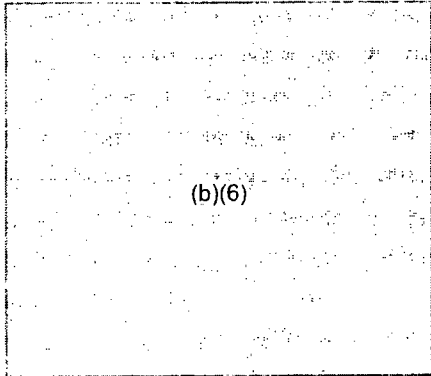
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

April 24, 1998



[0026]

Thank you for your letter regarding the current state of HIV and AIDS dated April 9, 1998.

I assure you that this Administration has been and will continue to be committed to combating the HIV/AIDS epidemic in this country and across the world. As you well know, far too many Americans become infected with the HIV virus every year and we are working harder than ever to find a cure.

I personally thank you for your own commitment to help stem this epidemic.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002c. letters	Inmate to Sandra Thurman re: Cures (Personal) (includes supporting documentation) (6 pages)	05/20/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19399

FOLDER TITLE:

Correspondence - Sandra L. Thurman - Outgoing - 5/98 [1]

2018-0764-F

jm2106

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
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- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]
- C. Closed in accordance with restrictions contained in donor's deed of gift.
- PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
- RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
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- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

THE WHITE HOUSE
WASHINGTON

May 27, 1997

Mr. Joseph Lovett
Lovett Productions
155 Sixth Avenue
New York, NY 10013-1507

Dear Joe:

Congratulations on your leadership award from AIDS Action Foundation, but especially for the work that you have done and continue to do on HIV/AIDS awareness and education.

Your annual specials on AIDS hosted by the American Broadcasting Company have not just updated the public on the latest issues, but have given a perspective and understanding that is unique in AIDS coverage. Reports from the National AIDS Hotline which you have always promoted on the show have reported increased calls during the televising of your programs. I can only imagine the numbers of people you have touched and educated about AIDS, but especially the number of lives that have probably been saved.

It is so important for people to understand that despite the progress we've made in research and treatment, the continuing infection rates make it very clear that *the epidemic is not over*. We are very concerned about people's understanding or lack of understanding of the importance of prevention when it comes to HIV/AIDS. While we are very hopeful with the advent of new drugs and combination therapies with the new drugs, we fully recognize the challenge presented to us regarding the public's understanding of these new drugs and therapies as well as new issues related to access to care, affordability, lifestyle decisions, etc. and are working to ensure that they continue to be aware and knowledgeable about HIV/AIDS.

Mr. Joseph Lovett
May 27, 1997
Page two

Thank you for the copies of the shows. They truly chronicle the epidemic and convey its major issues in the most personal way. We will put them to good use in our education programs. As you prepare your next ABC special, please let me know how I can be of any assistance.

Once again, congratulations on your award. I look forward to working with you in this battle against AIDS.

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra L. Thurman". The signature is fluid and cursive, with a large, sweeping initial "S".

Sandra L. Thurman

Director

Office of National AIDS Policy



30 April 1997

Daniel Montoya
Office of National AIDS Policy
808 17th NW
Suite 820
Washington, DC 20503
Tel: 202-632-1204 Fax: 202-632-1096

BY FAX

Dear Daniel,

we were thinking that it would be appropriate to include something in the letter about ABC's longterm commitment to AIDS coverage.

All the best,

A handwritten signature in cursive script, appearing to read "DeLoach".



C:\WPWIN60\WPDOCS\LANL97\MONTOY1.WPD



April 29, 1997

Daniel Montoya
Office of National AIDS Policy
808 17th NW (Suite 820)
Washington, DC 20503
Tel: 202-632-1204/Fax: 202-632-1096

Dear Daniel,

Thanks for getting back to me this afternoon. As I return to discussions with ABC about the annual special, it would be very helpful for me to have a letter from Sandy which acknowledges the importance of the specials. So if she could send me a letter of congratulations on the AIDS Action Foundation Leadership award which would say something like:

It was so nice to see you receive the AIDS Action Foundation Leadership award and be recognized for the important work you've done since the beginning of the epidemic. You were in very good company VP etc.

Your annual ABC specials have not just updated the public on the latest issues, but have given a perspective and understanding unusual in AIDS coverage. The counselors on the National AIDS Hotline which you have always promoted on the show have reported that you seem to be able to reach many people who had never quite "got it" before. You've indeed saved lives.

It is so important for people to understand that despite the progress we've made in treatment, the continuing infection rates make it very clear that *the epidemic is not over*. We are very concerned about people dropping their guard against infection thinking that a cure is around the corner. A new major concern is the development of new strains of the virus resistant to the drugs which we are now finding effective. New treatments bring about new issues: access to care, affordability, lifestyle decisions, etc. The new treatments do not work for everyone, and most of the people on them, find that a compromise in lifestyle is required.

Thank you for the copies of the shows. They truly chronicle the epidemic and convey its major issues in the most personal way. We will put them to good use in our education programs. As you prepare your next ABC special, please know that our office will do everything we can to help.

Once again, congratulations on your award. I look forward to helping you in your continuing work.

Thanks, Daniel and my very best to Sandy.

A handwritten signature in black ink, appearing to read "Joe Lovett", written in a cursive, flowing style.



C:\WPWIN60\WPDOCS\PENDING\97\4\MONTOYA.WPD

**FAX TRANSMISSION****DATE:** 4-29-97**FROM:** Joe Lovett**LOVETT PRODUCTIONS, INC.****TO:** DANIEL MONTAGNA & STACY THURMAN**FAX#:** 202-652-1096**NUMBER OF PAGES (INCLUDING THIS ONE):** 2**COMMENTS:**

Thank - you -
Please deliver ASAP

Original Document Will Follow if Indicated Below:

☐ Regular U.S. Mail
☐ 2nd Day Delivery

☐ Overnight
☐ Other



THE WHITE HOUSE
WASHINGTON

FILE COPY

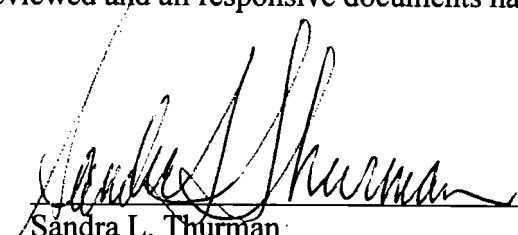
May 20, 1997

MEMORANDUM FOR: MICHELLE PETERSON
Associate Counsel to the President

REGARDING: May 5, 1997 Request for Documents

This certification is in response to the memorandum from Charles F.C. Ruff, Counsel to the President, regarding the 5/5/97 Document Request. By signing this document, I am certifying that I directed all individuals in my office to search their files as well as the office's files. To the best of my knowledge, these files have been reviewed and all responsive documents have been provided.

Office of National AIDS Policy:



Sandra L. Thurman
Director

THE WHITE HOUSE
WASHINGTON

May 20, 1997

MEMORANDUM FOR: SANDRA L. THURMAN

FROM: Michelle Peterson
Office of Counsel to the President

REGARDING: May 5, 1997 Request for Documents

On May 5, 1997, Charles F.C. Ruff circulated to all Executive Office of the President staff a request for documents. The request seeks a response by May 16, 1997. Please sign the attached certification so that we can establish that all appropriate files have been searched.

Thank you for your cooperation.

THE WHITE HOUSE
WASHINGTON

MEMORANDUM FOR WILDA CHISOLM

From: Todd A. Summers
Deputy Director
White House Office of National AIDS Policy
(202) 456-2437

Date: 5/27/98

Subject: **Scheduled Lunch Meeting**

Sandy is looking forward to the opportunity to meet with Congressman McDermott, especially in view of his Chairmanship of the Congressional Task Force on International HIV/AIDS. In the past, the primary focus of the Office of National AIDS Policy has been on domestic efforts to combat HIV/AIDS. However, we are working to increase our efforts on the international front. Consequently, Sandy is especially interested in the activities of the Task Force. She would also like to discuss the activities and priorities of the Office of National AIDS Policy.

Earlier this year, Sandy traveled to South Africa where she met with officials from the Ministry of Health, non-governmental organizations and trade union leaders. Based on her experiences from that trip, she believes workplace based education and prevention programs might hold potential for U.S. supported international efforts to battle this epidemic. With knowledge of the particularly effective Workplace Education Program conducted by the AFL-CIO's George Meany Center for Labor Studies, Sandy is interested in the Congressman's views of applying similar strategies overseas.

Sandy has suggested that Tom Stillitano, who has worked with her on international issues, Byron Charlton, Legislative Representative for International Affairs, AFL-CIO, and Robert Lovelace, of the AFL-CIO's International Institute, join the Congressman for a luncheon at the White House on June 10, 1998.

Please have Congressman McDermott and Legislative Assistant Rita Patel proceed to the Northwest Gate of the White House (currently under construction) on Pennsylvania Avenue, between the Old Executive Office Building and the White House for security clearance. We will meet them in the West Wing lobby and proceed to the White House dining room.

At your earliest convenience, please send the birth dates and social security numbers of the Congressman and Ms. Patel to Sandy's assistant, Sarah Holewinski (395-1441).

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Jane Silver
Director, Public Policy
American Foundation for AIDS Research
1828 L Street, NW
Suite 802
Washington, DC 20036

Dear Ms. Silver:

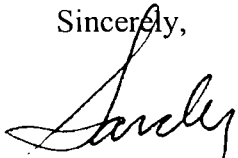
It is with great pleasure that we invite you to participate in a White House discussion on women and HIV/AIDS. The event will be held on Thursday, June 25th from 11 AM - 3 PM (EST), with arrival at 10:30 AM. The invitation is being extended to a small number of women across the country whose leadership will galvanize others to realize the dramatic increase in HIV/AIDS among women and explore ways for us to raise awareness throughout the country.

The purpose of this meeting is to explore the wide-ranging issues surrounding HIV/AIDS and women and to bring those issues to the forefront of our national women's health agenda. Invitees include a diverse group of leaders, from national health officials and prominent women's advocates to members of the HIV/AIDS community.

The discussion will be facilitated by Ms. Veronica Biggins, former director of White House Personnel.

If you are able to join us for the White House discussion on women and HIV/AIDS, we ask that you fully complete the enclosed questionnaire and return it to us as soon as possible. We look forward to your participation. Should you have any questions please feel free to call us at (202) 456-2437.

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Dr. Albert Pennybacker
President
National Council of Churches
110 Maryland Avenue, NE
Suite 108
Washington, DC 20002

Dear Dr. Pennybacker:

It is with great pleasure that we invite you to participate in a White House discussion on women and HIV/AIDS. The event will be held on Thursday, June 25th from 11 AM - 3 PM (EST), with arrival at 10:30 AM. The invitation is being extended to a small number of women across the country whose leadership will galvanize others to realize the dramatic increase in HIV/AIDS among women and explore ways for us to raise awareness throughout the country.

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Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Josephine Nives
Executive Director
NASW
750 First Street, NE
Washington, DC 20002

Dear Ms. Nives:

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Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Mildred Worth
Executive Director
Girls Incorporated
30 E. 33rd Street
New York, New York 10016

Dear Ms. Worth:

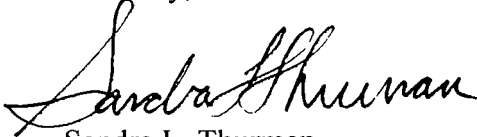
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Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Michael H. Trujillo
Director
Indian Health Services
5600 Fishers Lane
Room 6-05
Rockville, Maryland 20857

Dear Mr. Trujillo:

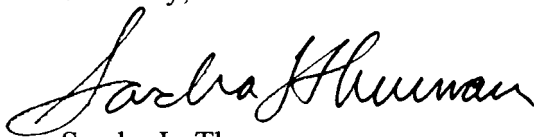
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Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Janis Wyman
Executive Director
American Association of University Women
111 16th Street, NW
Washington, DC 20036

Dear Ms. Wyman:

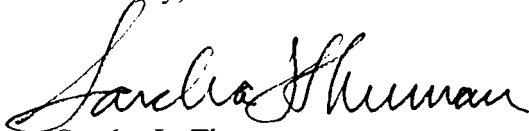
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Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Julie Rogers
President
Eugene and Agnes E. Meyers Foundation
1400 16th Street, NW
Suite 360
Washington, DC 20036

Dear Ms. Rogers:

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Director, Office of Women's Initiatives and
Outreach

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Elisa Sanchez
President
MANA, A National Latina Organization
1725 K Street, NW #501
Washington, DC 20006

Dear Ms. Sanchez:

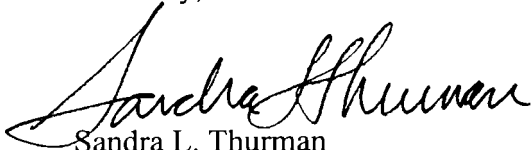
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Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Julia Scott
President
National Black Women's Health Project
1211 Connecticut Avenue
Washington, DC 20036

Dear Ms. Scott:

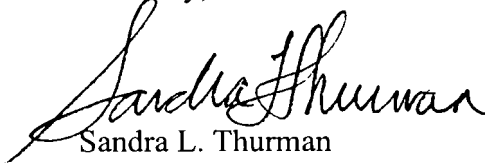
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Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Holly Sloan
Executive Director
Association of Junior Leagues International
660 First Avenue
New York, New York 10016-3241

Dear Ms. Sloan:

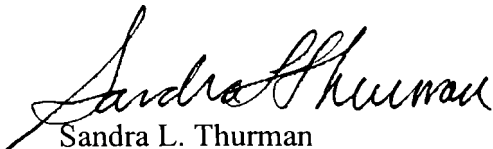
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Audrey Tayse Haynes
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Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Marie Wilson
President
Ms. Foundation for Women
120 Wall Street
33rd Floor
New York, New York
10005

Dear Ms. Wilson:

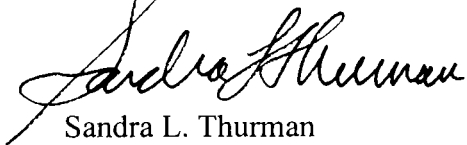
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Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Eleanor Smeal
President
The Feminist Majority
1600 Wilson Blvd., #801
Arlington, VA 22209

Dear Ms. Smeal:

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Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Felicia Lynch
President
Women and Philanthropy
1015 18th Street, NW
Suite 202
Washington, DC 20036

Dear Ms. Lynch:

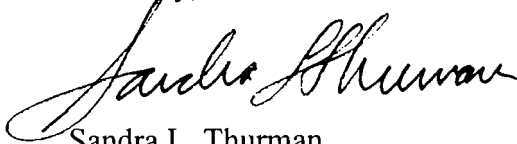
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Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Vicky McEneney
President
Women's Bar Association
815 15th Street, NW
Suite 815
Washington, DC 20005

Dear Ms. McEneney:

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Outreach

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Kimberly King
Executive Director
YMCA
1325 W Street, NW
Washington, DC 20009

Dear Ms. King:

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Outreach

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Mary Fisher
c/o Ann Duller
Family AIDS Network
87 Main Street
Nyack, New York 10960

Dear Ms. Fisher:

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Dot Ridings
President and CEO
Council on Foundations
1828 L Street, NW
Suite 300
Washington, DC 20036

Dear Ms. Ridings:

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Outreach

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Ann B. Garvin
President
Church Women United
475 Riverside Dr. #812
New York, New York 10115

Dear Ms. Garvin:

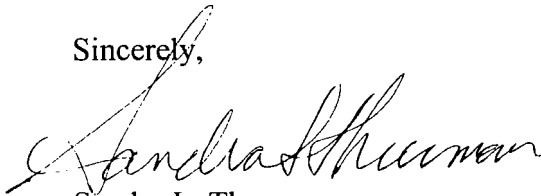
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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Faye Dissinger
President
General Federation of Woman's Club
1734 N Street, #309
Washington, DC 20036-2990

Dear Ms. Dissinger:

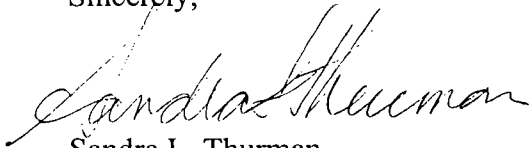
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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Phyllis Greenberger
Society for the Advancement
of Women's Health
1828 L Street, N.W. Suite 625
Washington, DC 20036

Dear Ms. Greenberger:

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Gloria Feldt
President
Planned Parenthood
810 7th Ave.
New York, New York 10019

Dear Ms. Feldt:

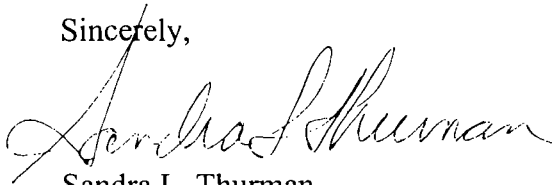
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Elizabeth Dole
President
American Red Cross
43 17th Street, N.W.
Washington, DC 20006

Dear Ms. Dole:

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Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Nancy Dickey, MD
President
American Medical Association
515 North State Street
Chicago, Illinois 60610

Dear Dr. Dickey:

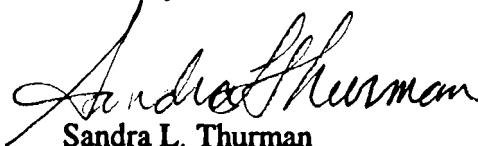
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Glenda Bailey
Editor-in-Chief
Marie Claire
1790 Broadway, 3rd Floor
New York, New York 10019

Dear Ms. Bailey:

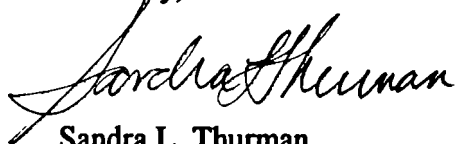
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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Helen Gayle, MD, MPH
Director
National Center for Prevention Services Centers
for Disease Control and Prevention
MS E07
Atlanta, Georgia 30333

Dear Dr. Gayle:

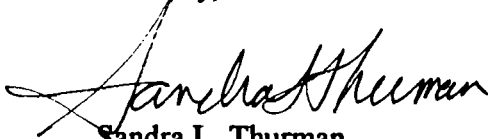
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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

LaVerne Alexander
Director of Government Relations
Girl Scouts of USA
1025 Connecticut Avenue, N.W. Ste. 309
Washington, DC 20036

Dear Ms. Alexander:

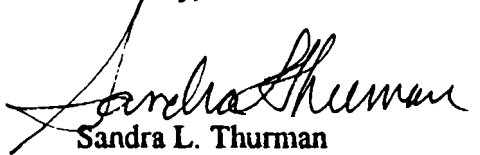
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Eileen McGrath, JD, CAE
Director
American Medical Women's Association
801 North Fairfax Street
Suite 400
Alexandria, Virginia 22314

Dear Dr. McGrath:

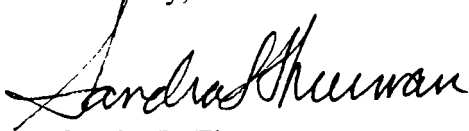
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Outreach

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Marian Wright Edelman
President
Children's Defense Fund
25 E Street, N.W.
Washington, DC 20001

Dear Ms. Edelman:

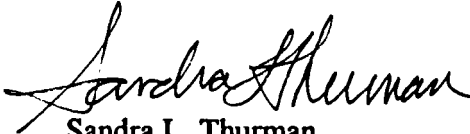
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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Judy Lichtman
President
National Partnership for Women and Families
1875 Connecticut Avenue, NW
Suite 710
Washington, DC 20009-5728

Dear Ms. Lichtman:

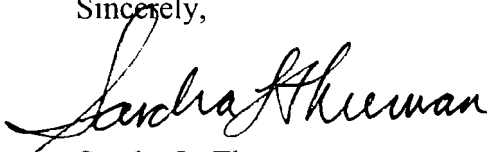
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Outreach

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Beverly Malone
President
American Nurses Association
600 Maryland Avenue, SW #100W
Washington, DC
20024

Dear Ms. Malone:

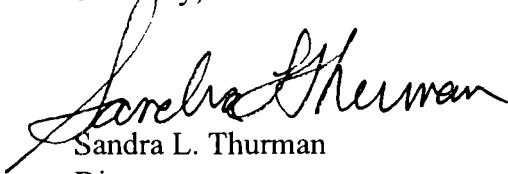
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Prema Mathai-Davis, PhD
Chief Executive Director
YWCA of the USA
Empire State Building
350 Fifth Avenue
Suite 303
New York, New York 10118

Dear Dr. Mathai-Davis:

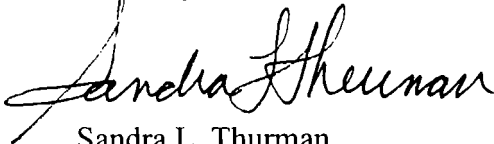
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Deputy Assistant to the President and
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Marjorie Muecke, PhD
President
Ford Foundation
320 East 43rd Street
New York, New York 10017

Dear Dr. Muecke:

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Billy Jean King
Director
World Teamtennis
445 North Wells
Suite 404
Chicago, IL 60601

Dear Ms. King:

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WASHINGTON

May 26, 1998

Francis Kissling
President
Catholics for Free Choice
436 U Street, NW #301
Washington, DC 20009

Dear Ms. Kissling:

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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Wanda Jones, PhD
Deputy Assistant Secretary for Health
US Department of Health and Human Services
200 Independence Avenue, SW
Room 730B
Washington, DC 20201

Dear Dr. Jones:

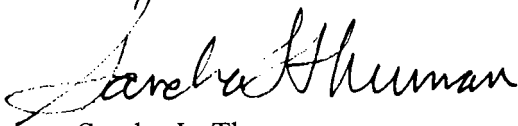
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Gloria Johnson
President
Coalition of Labor Union Women
1126 16th Street, NW
Washington, DC 20036

Dear Ms. Johnson:

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WASHINGTON

May 26, 1998

Alexandra Levine
USC School of Medicine
Kenneth Norris Center Hospital MS 34
1441 East Lake Avenue
Room 801
Los Angeles, California 90033

Dear Ms. Levine:

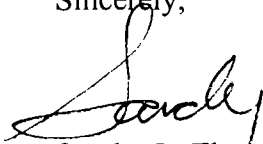
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Jane Smith, PhD
President and CEO
National Council of Negro Women
633 Pennsylvania Avenue, NW
Washington, DC 20004

Dear Dr. Smith:

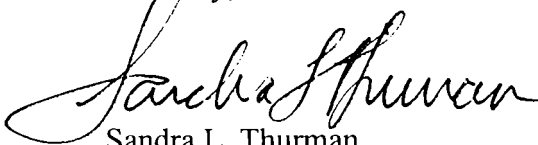
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THE WHITE HOUSE

WASHINGTON

May 26, 1998

Julian Malveaux

President

National Association of Negro Business Women and Professional Women's Clubs, Inc.

1806 North Hampshire Avenue, NW

Washington, DC 20009

Dear Ms. Malveaux:

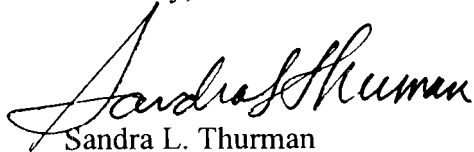
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Audrey Tayse Haynes

Deputy Assistant to the President and

Director, Office of Women's Initiatives and Outreach

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as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Karen Nussbaum
Director of the Working Women's Department
AFL-CIO
888 16th Street, NW
7th Floor
Washington, DC 20006

Dear Ms. Nussbaum:

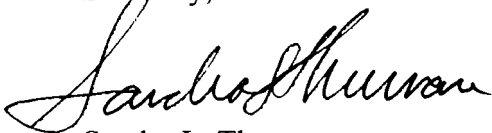
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If you are able to join us for the White House discussion on women and HIV/AIDS, we ask that you fully complete the enclosed questionnaire and return it to us as soon as possible. We look forward to your participation. Should you have any questions please feel free to call us at (202) 456-2437.

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE

WASHINGTON

May 26, 1998

Mary Chung
President
National Asian Women's Health Organization
310 8th Street
Suite 100
Oakland, California 94607

Dear Ms. Chung:

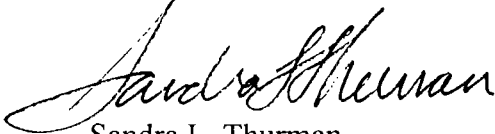
It is with great pleasure that we invite you to participate in a White House discussion on women and HIV/AIDS. The event will be held on Thursday, June 25th from 11 AM - 3 PM (EST), with arrival at 10:30 AM. The invitation is being extended to a small number of women across the country whose leadership will galvanize others to realize the dramatic increase in HIV/AIDS among women and explore ways for us to raise awareness throughout the country.

The purpose of this meeting is to explore the wide-ranging issues surrounding HIV/AIDS and women and to bring those issues to the forefront of our national women's health agenda. Invitees include a diverse group of leaders, from national health officials and prominent women's advocates to members of the HIV/AIDS community.

The discussion will be facilitated by Ms. Veronica Biggins, former director of White House Personnel.

If you are able to join us for the White House discussion on women and HIV/AIDS, we ask that you fully complete the enclosed questionnaire and return it to us as soon as possible. We look forward to your participation. Should you have any questions please feel free to call us at (202) 456-2437.

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Audrey Tayse Haynes
Deputy Assistant to the President and
Director, Office of Women's Initiatives and
Outreach

Attachment:
as stated

THE WHITE HOUSE
WASHINGTON

May 20, 1998

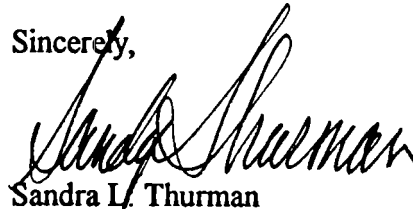
Louis Dorff
Executive Director
Love Heals
The Alison Gertz Foundation
345 Park Avenue
New York, New York 10154

Dear Mr. Dorff:

Thank you so much for the educational film *Ali Gertz: In Her Own Words*. My staff and I found the story inspirational and hope that it reaches those most in need.

I wish you the best in your continued efforts to fight for people living with HIV and AIDS.

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra L. Thurman", written over the printed name.

Sandra L. Thurman
Director
Office of National AIDS Policy

THE WHITE HOUSE
WASHINGTON

May 20, 1998

Ms. Pam Calvin
P.O. Box 183
Denisan, Texas 75020

Dear Ms. Calvin:

Thank you for writing the Office of National AIDS Policy.
To help you further pursue your knowledge on the HIV/AIDS epidemic,
we have contacted the National Alliance of State and Territorial AIDS
Directors. Please call the number provided which will aid you in your
continued efforts concerning HIV/AIDS; 202-434-8090.

Sincerely,

A handwritten signature in cursive script, reading "Sandra L. Thurman". The signature is written in dark ink and is positioned above the typed name and title.

Sandra L. Thurman
Director
Office of National AIDS Policy

THE WHITE HOUSE
WASHINGTON

May 18, 1998

Warmest Greetings:

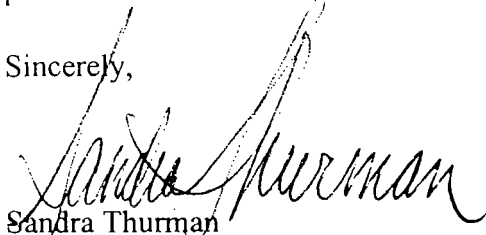
I am pleased to join you in the first National AIDS Vaccine Awareness Day being commemorated in Maryland and across the United States.

I want to commend the more than 4,500 volunteers nationwide, and the more than 450 volunteers from the Maryland, District of Columbia and Virginia area who have or are participating in HIV prevention vaccine clinical trials. The Johns Hopkins Center for Immunization Research should be commended for taking a leadership role in this important endeavor.

There is no cure for AIDS. A successful vaccine is our best hope for preventing new infections both here and internationally. With more than 640,000 cases of AIDS in the United States, and more than 30 million individuals living with HIV or AIDS in the world, we must do all that we can to find a vaccine to prevent new infections.

The volunteers in these HIV prevention clinical trials, all HIV uninfected, have acted out of a noble and generous spirit of concern for others. I salute all who are involved in finding an HIV prevention vaccine and call on others to join in this effort.

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra Thurman", written over a horizontal line.

Sandra Thurman

Director

Office of National AIDS Policy

THE WHITE HOUSE
WASHINGTON

May 15, 1998

Jay Coburn
John Guerra
Chester Restaurant
404 Commercial St
Provincetown, MA 02657

Dear Mr. Coburn and Mr. Guerra:

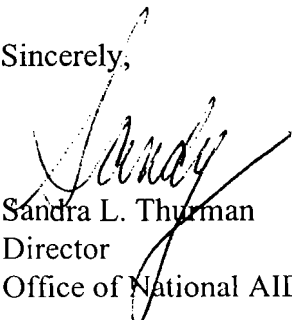
Congratulations on your new adventure, Chester Restaurant!

I am excited for you as you undertake this next phase in your lives. Your work as tireless AIDS advocates, both in Washington and across the United States, has allowed you to serve the community in a most fortunate way. Chester Restaurant will now allow you to serve the community, in a different, but still important way -- through "fine foods and innovative wines."

Thank you for your tireless efforts on behalf of people living with HIV disease and I wish you the best of success in your new endeavor.

I promise to stop by the next time I am in Provincetown!

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

THE WHITE HOUSE

WASHINGTON

May 13, 1998

The Honorable Calvin Smyre
Post Office Box 181
Columbus, Georgia 31902

Dear Calvin,

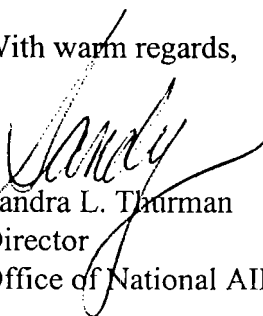
It was great to see you last week at the DNC event. I must say that everybody appeared to be having a grand time. It is hard to believe that we are already looking for a site for the convention in the year 2000. My, how time flies!

I apologize for not having sent you a note sooner to thank you for the beautifully framed copy of the article from the *Atlanta Journal Constitution*. I can't begin to tell you how surprised and touched I was by your thoughtfulness. Everyone on Air force Two was very impressed!

I know you have countless friends here, but I do hope that you carve out a little time when next you find yourself in Washington so I can take you to lunch at the White House Mess. Visiting with friends and catching up on news from home is always a treat for me.

I look forward to seeing you soon.

With warm regards,



Sandra L. Thurman
Director
Office of National AIDS Policy

THE WHITE HOUSE
WASHINGTON

MEMORANDUM TO THE RUSSIAN CONSULAR

From: Sandra L. Thurman
Director
Office of National AIDS Policy

Date: May 13, 1998

Re: Visa Request

I would like to request a visa for my upcoming official travel to St. Petersburg and Moscow, Russia. I will be in St. Petersburg from May 16th - May 19th, and in Moscow from May 20th - May 21st.

My activities in St. Petersburg include receiving an award and presenting remarks on Monday, May 18th at the 6th International Conference on 'AIDS, Cancer and Related Problems.' The Conference is sponsored by the Ministry of Science and the BioMedical Center. In addition, I will be involved in numerous discussions with Conference participants on Tuesday, May 19th.

Dr. Kozlov, Director of the BioMedical Center and Coordinator of the Conference should be used as the point of contact for this itinerary. His office phone is: 7 812-230-4959; Fax: 7 812-230-7869; E-Mail: biomed@mailbox.alkor.ru. The Conference coordinators will be providing all hotel accommodations as well as all necessary transportation during my stay in St. Petersburg and Moscow.

An overnight train will take me to Moscow - arriving on Wednesday, May 20th. While there I will meet with the Minister of Health and the Minister of Science, as well as participate in cultural activities during the minimal free time.

My general schedule is as follows:

May 16th 6:10 PM -

May 17th 8:25 AM

Delta Airlines Flight #2772, Seat 9D

Departing Washington Dulles en route Zurich, Terminal A

11:35 AM - 4:40 PM

THE WHITE HOUSE
WASHINGTON

May 12, 1998

Viva M. Dennis
Family and Youth Services Section
AIDS Institute, New York State Department of Health
5 Penn Plaza, 1 Fl. South
New York, NY 10001-1810

Dear Ms. Dennis:

Thank you for taking time to share with the Mrs. Clinton your concerns about the devastating impact that HIV disease is having on the American public. The First Lady asked me to respond to your letter. I am saddened to hear that one of your children is HIV positive and I wish them the best of health.

As you know, the Clinton Administration has done more than any previous administration in terms of addressing HIV. Funding for HIV prevention efforts alone totaled more than \$633 million in Fiscal Year 1998. The President's Fiscal Year 1999 funding request for HIV prevention efforts was \$637 million, a 23 percent increase over when the President first assumed office. I clearly understand that additional efforts are needed, and I will continue to push for additional resources. At the same time, this Administration has focused on better targeting current resources, on ensuring that the care and services needed by people with HIV disease are available and on opposing discrimination against people living with AIDS.

As a society, we must all strive to do what we can to prevent new infections, and to make sure that those who are already infected are provided the services they need in order to lead productive lives. Your speaking out on this issue can go a long way to educating the policy makers at all levels, especially state and local officials.

I commend you for your efforts and I admire your strength of character.

Sincerely,


Sandra L. Thurman
Director
Office of National AIDS Policy

Data Entry Form

Letter ID

10803

Writer First Name

Jacquelyn

Writer Last Name

Stanton-Rosario, MD

Received Date

5/8/98

Subject

Resume

☐ Response Required?

Response Type

Response Date

Responder ID

Responder Name

Action Promised

Action Completed

Action Date

Addressed To

Notes

Sender's Organization

Sender's Street1

Sender's Street2

Sender's City

Sender's State

Sender's Zip

THE WHITE HOUSE
WASHINGTON

May 19, 1998

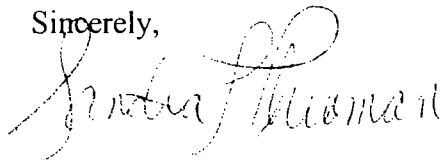
Jacquelyn Stanton-Rosario, MD EdD
3820 12th Street South
Arlington, Va. 22204

Dear Dr. Stanton-Rosario:

Thank you for your interest in the Office of National Aids Policy. Your qualifications indicate that you are familiar with the issues relevant to this office, however, we are sorry to inform you that our office does not have any vacancies. We will certainly keep your resume on file for future reference.

We wish you the best of luck in your future endeavors.

Sincerely,

A handwritten signature in cursive script, appearing to read "Sandra Thurman".

Sandra L. Thurman
Director
Office of National AIDS Policy

3820 12th Street South
Arlington, Va. 22204
May 7, 1998

Dr. Sandra L. Thurman, Director
Office of National AIDS Policy
The White House
736 Jackson Place, N.W.
Washington, D.C. 20503

Dear Dr. Thurman:

Upon the suggestion and recommendation of Mr. Chet Grey, who sends you warm regards, I am pleased to forward a copy of my resume for consideration of employment as a short-term consultant or other positions which may be available. Of special interest to me are any new HIV/AIDS prevention initiatives that are being planned for women, youth, injection drug users, or racial minorities. My exposure to the HIV/AIDS epidemic began early in my professional career as a medical student in Newark, New Jersey, 1982.

Since completing my studies, I have worked in varied capacities, many of which have required continued attention to this changing global public health problem. I possess a unique complement of skills and knowledge in health education and disease prevention with over twenty years of experience in providing technical assistance to agencies and organizations as well as direct services to clients and patients. Several projects funded by government agencies, on which I have participated, specifically addressed the need for information regarding HIV/AIDS.

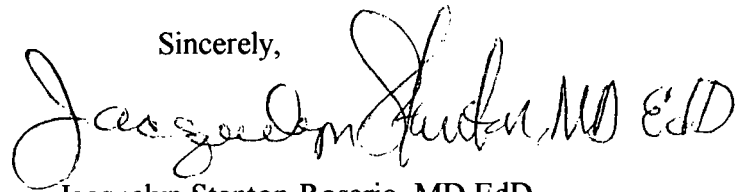
Under a project sponsored by the Center for Disease Control and Prevention, I assisted in the coordination of a national advisory panel convened to conceptualize and design a resource guide for HIV prevention community planners and program managers. I was responsible for the initial research and development of this handbook on HIV/AIDS prevention strategies for implementation among injection drug users and others engaged in high risk sexual behavior. Development of the first draft of this handbook involved an extensive collaborative process as well as substantial written syntheses of oral and written feedback from the panel of national advisors, CDC technical advisors and three senior scholars in the field of HIV/AIDS prevention research.

The National Institute on Drug Abuse was created to ensure accurate and widespread dissemination of research findings related to drug abuse and addiction to targeted audiences. The risk of HIV infection from injecting drugs was stressed in many of the educational materials that were produced. My tasks have involved the following activities: conducting need assessments with focus groups, surveys, and interviews; developing research reports on specific drugs, including cocaine, heroin and methamphetamine, for the general public; and developing informational materials for special audiences such as patients in substance abuse treatment.

As a Diplomacy Fellow for the American Association for the Advancement of Science, I was assigned to the Africa Bureau at the U.S. Agency for International Development. In collaboration with ministries of health and education from several African countries, I focused on the development of educational materials and curricula for youth. These materials included messages for health promotion and disease prevention strategies, especially regarding the prevention of HIV infections.

I have excellent communication skills, both oral and written. Through many years of professional experience, I have acquired skills in other areas including strategic planning, project development and management, research, interpersonal communications and interviewing. I enjoy working in culturally diverse environments as part of a team or working independently. I am confident that the combination of my skills, training and abilities might contribute to the efforts of your office. I would welcome an opportunity to meet and talk with you.

Sincerely,

A handwritten signature in black ink, reading "Jacquelyn Stanton-Rosario, MD EdD". The signature is fluid and cursive, with the first name "Jacquelyn" being the most prominent part.

Jacquelyn Stanton-Rosario, MD EdD

JACQUELYN Y. STANTON-ROSARIO, M.D., Ed.D.

3820 12th Street South
Arlington, Va. 22204
(703) 979-3552

EDUCATION

M.D.	University of Medicine and Dentistry of New Jersey, Newark, New Jersey
Ed.D.	University of Massachusetts, Amherst, Massachusetts, Counseling Psychology
M.Ed.	University of Massachusetts, Amherst, Massachusetts, Education
B.S.	University of Massachusetts, Amherst, Massachusetts, Psychology
Other	Graduate Studies in Social Work, University of Buffalo, Buffalo, New York

PROFESSIONAL EXPERIENCE

HI-TECH International, Inc. Arlington, Va. 1994- present.

Senior Technical Writer. Responsibility included the initial development of a community planning handbook, funded by the Center for Disease Control, on HIV/AIDS prevention strategies for implementation among injecting drug users and others engaged in high risk sexual behaviors.

Materials Developer. National Institute on Drug Abuse (NIDA) research reports on specific drugs including heroin, LSD, cocaine, and methamphetamine; reports on substance abuse prevention research among youth, and educational materials on substance abuse for primary health professionals, policy-makers, and patients in drug treatment.

Project Coordinator. Coordination of summer health series on problems of youth including HIV/AIDS, suicide, violence, drugs, and pregnancy for the District of Columbia Public School nursing personnel.

Facilitator: "Preventing Substance Abuse and HIV: A National Leadership Forum". August 14-16, 1996, Tampa, Florida

ASPIRA, Inc. Washington, D.C., 1994

Materials Developer. Development of workshop curricula for substance abuse prevention project for Latino youth focusing on knowledge, attitudes, values, self-esteem, and activities for community action in seven major urban locales.

Creative Associates, Inc. Washington, D.C., 1993-1994

Implemented several international development health and education projects on behalf of the Agency for International Development as follows:

Evaluator. Responsibilities include evaluation of U.S. Agency for International Development sponsored nutrition communication project which focuses on the transfer of

technical skills in social marketing, communication, and nutrition education to developing country personnel assigned to organizations concerned with maternal and child health.

Policy Developer. Served as a team member for the performance assessment of the A.I.D. American Schools and Hospitals Abroad (ASHA) program, evaluating schools and hospitals in India and Pakistan which had received grants and participated in the development of new program guidelines and criteria for future recipients.

Research Coordinator. Designed and facilitated the implementation of a research study to document lessons learned regarding the integration of health, population, and environment education into basic education curricula in three countries of sub-Saharan Africa.

Diplomacy Fellow. American Association for the Advancement of Science and the Agency for International Development. Washington, D.C., 1990 to 1993. Responsibilities included:
Conducting major research project on relationships between female education and health, population and nutrition parameters as analyzed from demographic and health surveys in ten African countries;
Conducting field based study focused on defining potential linkages among the education, health, population and nutrition sectors for public health interventions in Africa programs;
Developing program reviews and evaluations, donor briefings, and attending conferences that address specific sectoral and economic issues of A.I.D.'s Africa Bureau and preparing appropriate reports;
Providing technical and analytical support in the health and education areas and for spearheading the development of analytical agenda for the Health and Human Resource Division of the Analysis, Research, and Technical Support Office;
Attending and reporting on professional meetings of the Population Association of America, the American Public Health Association, and the National Council for International Health.;
Coordinating project activities with multi-lateral and bi-lateral donors, such as the World Bank, UNICEF, and UNFPA as appropriate; and,
Maintaining consultative relationship for divisional activities in several Sub-Saharan African countries, assisting AID Missions with technical inputs as well as communicating Mission interests at Agency for International Development/ Washington.

RSA, Inc., Washington, DC. 1988 - 1990

Research Consultant

As senior associate for educational research and development, responsibilities included:

Design of data collection interview instruments;
Management of data collection; and,
Development of educational policy and program designs for bilingual programs.

Pediatric Residency 1986-1988. Hospital rotations were at Newark Beth Israel Medical Center, Newark, New Jersey; Children's Specialized Hospital, Mountainside, New Jersey; Elizabeth General Hospital, Elizabeth, New Jersey; Greater Southeast Hospital, District of Columbia General Hospital

and Howard University Hospital in Washington, DC. While in a primary care track residency was responsible for:

- The day-to-day management of patient care in hospital settings for the neonatal intensive care unit to ambulatory and well baby clinics;
- Case management of infants with AIDS;

- Supervision and instruction of medical students;
- Didactic preparation for case presentations, seminars and conferences; and,
- Coordination of patient services from multiple agencies and institutions.

Assistant Professor of Education. 1973-79. School of Education, University of Massachusetts, Amherst, Massachusetts. Responsibilities of the position included:

- Supervision of doctoral candidates engaged in dissertation preparation and advising undergraduate students;
- Conceptualization and production of curricula which focus on the etiology of social and cultural factors affecting individual behavior and development;
- Design and implementation of models for community based academic programs for adult learners;
- Development and teaching research methodology, behavioral sciences, and education courses;
- Coordination of special academic programs within minimum security state prisons; and,
- Development of criteria for evaluating and awarding academic credit for knowledge and skills acquired in non-traditional settings.

Assistant Professor of Psychology. 1971-73. Stockton State College, Pomona, New Jersey. Responsibilities of the position included:

- Conceptualization, development and expansion of psychology curricula and innovative projects, including a community based county-wide program which placed student interns in drug rehabilitation centers and other public service agencies;
- Development and teaching courses in Child Psychology, Psychopathology of Children, Counseling Theory, Human Sexuality, and Crisis Counseling; and,
- Advisement of undergraduate students in clinical psychology.

Director of Counseling. 1968-70. University of Massachusetts, Amherst, Massachusetts. Responsibilities of the position included:

- Management and supervision of a comprehensive counseling program whose mission was to mainstream and guide high school students into university settings;
- Supervision, training and evaluation of a diversified staff of professional, students and volunteers;
- Facilitation of group and individual therapy sessions;
- Implementation of therapeutic models of intervention for special needs adolescents;
- Planning and directing all out-reach counseling services during the academic year and

therapeutic residential component during the summer session; and,
Implementation of a student counseling program utilizing behavior modification techniques that focused on developing leadership skills, motivation and academic performance improvement.

Child Caseworker. 1967-68. Department of Child Welfare, Buffalo, New York. Responsibilities of the position included:

Provision of daily crisis intervention services and administrative assistance to families with dependent children;
Management of foster care cases requiring advocacy for children in relationship to schools, medical facilities, biological and foster families, and other constituents;
Counseling unwed mothers regarding placement of their newborns;
Evaluation of prospective adoptive parents, including psychological assessments, financial reviews, employment histories, and medical and fertility examinations; and,
Coordination of institutionalization services for children with severe physical mental impairments.

OTHER CONSULTANT EXPERIENCE

Education Consultant. Empire State College, New York

Design education development services for individualized tutorial program in psychology.

Evaluation Consultant. Adult Basic Education Program, Hartford Public Schools, Hartford, Connecticut.

Evaluate the adult basic education programs located in the Latino community. The evaluation dealt with the assessment of staff competencies, diversity of program, effectiveness in the delivery of educational services, and the quality of resource materials.

Development Consultant. Educational Opportunity Programs. Stockton State College, Pomona, New Jersey.

Design, implementation and evaluation of the academic and personal counseling component of the summer residential program.

Management Consultant. Continuing Collegiate Education of Black Students Program. University of Massachusetts, Amherst, Massachusetts.

Develop the human relations program, the counseling model and a curriculum for fifty graduate students who were employed as tutors and counselors.

Training Consultant. Office of Student Affairs. University of Massachusetts, Amherst, Massachusetts

Provide individual and group counseling for students, facilitated sensitivity groups for

student affairs staff, and created training programs for residential personnel.

COMMUNITY SERVICE

Served as volunteer to numerous institutions such as the Belchertown School for the Mentally Retarded, the Northampton State Hospital, the Northeast Tutorial Services (NETS), Atlantic Community College, and the Lackawana Community Center. The focus of my volunteer services has been to provide supplemental social and educational services to organizations working with underserved children and youth.

TRAVEL

Extensive work or study related travel to Brazil, Cameroon, China, Costa Rica, Denmark, England, France, Ghana, India, Italy, Japan, Kenya, Mexico, Morocco, Nigeria, Pakistan, South Africa, Spain, Swaziland, The Netherlands, Venezuela, Yugoslavia, Puerto Rico and most of the Caribbean countries.

LANGUAGES Spanish language skills

AFFILIATIONS

American Public Health Association
American Association for the Advancement of Science

THE WHITE HOUSE

WASHINGTON

April 30, 1998

To the supporters of the Humsafar Trust,

Good Evening. On behalf of the President and Mrs. Clinton, I thank you for being here this evening to show your support for Ashok Row Kavi and the Humsafar Trust in Mumbai. I only regret that I cannot be there in person to share this remarkable event.

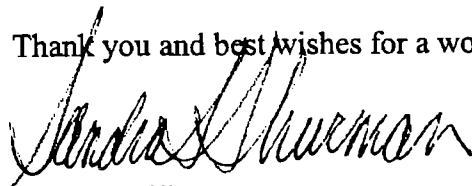
I spent time working in South Asia. I know its tremendous beauty and wonder. I know the hospitality, kindness and character of its people. I also know how vulnerable it has become to the spread of HIV/AIDS and how devastating the effect will be if not stopped.

In order to fight this battle, our fortitude must be stronger, our cunning more wiley than that of the virus'. We must not let our efforts be slowed by politics nor our vision be clouded by cultural bias. We must cultivate the best and most essential parts of our humanity. We must reach out, with strength and compassion to all of our brothers and sisters affected by HIV/AIDS, all of our mothers and fathers, all of our children and partners, all of our neighbors rich and poor.

If we are to win our battle against AIDS, and I know we can, we must band together so that the strength of our grip will stop HIV in its path. We must continue to battle with our ingenuity, our anger, our tolerance, our generosity and care for all of humanity.

This is the kind of courage exemplified by Mr. Row Kavi and the Humsafar Trust. I am proud to spread the good news of their work. I applaud them in their efforts and I applaud you for being here tonight to support them.

Thank you and best wishes for a wonderful evening,



Sandra L. Thurman

Director

Office of National AIDS Policy

COLUMBIA UNIVERSITY/HARLEM HOSPITAL CENTER

DIVISION OF INFECTIOUS DISEASES

ROOM 3101A

506 LENOX AVENUE

NEW YORK, NY 10037

Tel: (212) 939-2940

Fax: (212) 939-2968

*Paul Knox
217 East 61st St
NY NY
10021*

faxto: Sarah Holawinskifax #: 202-456-2439from: Paul Knoxdate: 4/28subject: Humstar Trust Draft Letterpages: 3

NOTES:

COLUMBIA UNIVERSITY
COLLEGE OF PHYSICIANS & SURGEONS
HARLEM HOSPITAL CENTER

DEPARTMENT OF MEDICINE

April 28, 1998

Sarah Holewinski
Office of National AIDS Policy
The White House
Fax: 202-632-1096

Re: Humsafar Trust Event, May 2, 1998

Dear Ms. Holewinski:

Attached is a draft letter to be read in Ms. Thurman's name at our event this coming Saturday, May 2, 1998.

Please let me know if I may be of any further assistance, and thank you very much for all of your help.

Sincerely,



Paul Knox

o: (212) 939-2967

h: (212) 826-9832

cc: Joseph McCormack

