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AIDS TASK FORCE OF P.O. BOX 55703, BIRMINGHAM, ALABAMA 35255
ALABAMA

FAX

Date: 5/29/97
Number of pages including cover sheet: 2

To:

SaraSandy Thurman's office

Phone:

202-632-1090

Fax phone:

202-632-1096

CC:

From:

Randall H. Russell

Phone:

(205) 781-6448

Fax phone:

(205) 788-4643

REMARKS:

☐ Urgent☐ For your review☐ Reply ASAP☐ Please comment

Thank you for your kind assistance.

*you are already
tentatively scheduled
for the Sept 17th
Conference - would you
like to do this one
as well?*

*Please decline
I will be in Miami
for conference + meetings*

CONFIDENTIALITY NOTATION

THE INFORMATION CONTAINED IN THIS FACSIMILE MAY BE LEGALLY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR AGENT OF THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS TELECOPY IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS FACSIMILE TRANSMISSION IN ERROR, PLEASE IMMEDIATELY NOTIFY THIS OFFICE AT (205) 781-6448 AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS. THANK YOU.



The AIDS Task Force of Alabama (ATFA) is a non-profit organization dedicated to state-wide HIV/AIDS prevention, housing and services for persons living with HIV.

May 29, 1997

Sandy Thurman
Director
Office of National AIDS Policy
808 11th Street, NW
Washington, DC 20009

BOARD OF DIRECTORS

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Vice-President, Theodore R. Debro, Jr., LHD
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Secretary, Mike Boswell
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President's Appointee, Susan Corbin, PhD

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Rabbi Jonathan Miller
Rev. Ronald E. Nored
Tim Rabon, MBA
Sharon Shaw, DrPH
Marsha Sturdevant, MD
Susan Wilder, MSW
W.L. Williams, III

STAFF

Randall H. Russell
Executive Director

Dear Ms. Thurman:

Thank you for your consideration of speaking at Alabama's Awards Dinner in Montgomery, Alabama on October 2, 1997. This dinner, sponsored by the AIDS Task Force of Alabama, Inc. (ATFA), is held annually in conjunction with the Alabama Department of Public Health's AIDS Symposium.

The 10th Annual Alabama AIDS Symposium which will be held October 1-3, 1997, will commemorate ten years of providing HIV/AIDS information to the citizens of Alabama and services for those persons who need our help. While the average attendance for the symposium is 900 participants, planning committee members anticipate 1,200 attendees for this year's conference.

The Awards Dinner highlights the achievements and gives recognition to those making significant contributions to the HIV/AIDS community. Nominations are sought statewide for *Volunteer of the Year*, *Agency of the Year*, *Medical/Research/Scientific Personnel of the Year*, *Educator of the Year* and *Pastoral Achievement of the Year*. Past speakers for the Awards Dinner include Dr. Claude Earl Fox, former Alabama State Health Officer and current Director of HRSA, Dr. David Satcher, originally from Anniston, Alabama and now serving as Director of The Centers for Disease Control and Prevention in Atlanta, Mary Fisher, founder of the Family AIDS Network and well-know AIDS activist and Dr. Donald Francis, internationally renowned AIDS researcher.

ATFA has provided more than: 12,000 nights of housing through its Next Step Housing Program; 7,300 nights of housing at Agape House; 2,600 rental assistance checks statewide; 1,750 hours of case management; 11,000 Healthy Harvest Meals; and 6,000 transportation services to clients.

Should you agree to being our keynote speaker, ATFA would provide airfare, as well as other expenses, including an honorarium, as appropriate. A

P.O. BOX 55703
BIRMINGHAM, AL 35255
205-781-6448
205-788-4643 FAX

Sandy Thurman
Page Two
May 29, 1997

reply would be appreciated as soon as possible in order to meet printing deadlines. Again, thank you for your thoughtful consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Randall H. Russell", written over a horizontal line.

Randall H. Russell, MSW
Executive Director

RHR:sc

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3808

Date Rcvd: 06-02-97

From: Randall H. Russell
AIDS Task Force of Alabama

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____

n:\corresli



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May 29, 1997

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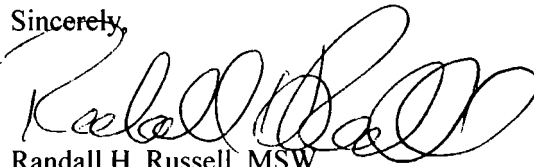
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Sandy Thurman
Page Two
May 29, 1997

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A handwritten signature in black ink, appearing to read "Randall H. Russell". The signature is stylized with large, flowing loops and is positioned above the printed name.

Randall H. Russell, MSW
Executive Director

RHR:sc

Clinton Presidential Records Digital Records Marker

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AIDS Task Force of Alabama

A Publication of AIDS Task Force of Alabama, Inc.

No. 3

A non-profit organization dedicated to state-wide HIV/AIDS prevention, services, and housing for persons living with AIDS.

NONDISCRIMINATION POLICY

The AIDS Task Force of Alabama will not discriminate on the grounds of race, ethnicity, color, gender, familial status, sexual orientation, national origin, age or handicap. All persons are welcomed to any ATFA Program. The AIDS Task Force of Alabama is an equal opportunity employer.



BOARD OF DIRECTORS

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Rabbi Jonathan Miller
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Tim Rabon, MBA
Sharon Shaw, DrPH
Marsha Sturdevant, MD
Susan Wilder, MSW
W.L. Williams, III

Staff

Randall H. Russell, MSW	Executive Director
Mazen Abou-Shaban	Asst. to Director of Finance
Rusty Bennett	Administrative Assistant
Amy Chauvin, MBA	Director of Finance
Karen Cooper	Housing Assistant
Shirley Crocker	Development Manager
Kijafa Davis	Community Outreach Worker
Greg Delemus	Van Driver
Beverly George	Office Manager
Robert Gillespie, LBSW	Social Worker
Kenneth Gowens	Social Worker
Elaine Harris-Banks	Social Work Intern
Yvonne Howze, MDiv	Director of Education
Kate Kellenberger, LGSW	Director of Programs
Laura LeBlanc	Social Work Assistant/JV
Carmen LeCoq, LBSW	Social Worker
Alicia Nowachek, LBSW	Housing Manager
Loren Peters, MPH	Coordinator, CAVO
Maury Petrak	Housing Assistant/JV
Kim Spruiell	Finance Associate
Peggy W. Polk, LBSW	Social Worker

Shirley Crocker Newsletter Editor

President's Message

This newsletter introduces you to our new Board of Directors and I am privileged to serve with them in my capacity as President. In February, the Board retreated to Twin Pines Conference Center where we spent two days getting to know each other and making long term plans for meeting the needs of Alabama's HIV-infected population. Planning involves a commitment to taking some risks in order to better assist the people we serve. All CBOs are faced with taking risks.

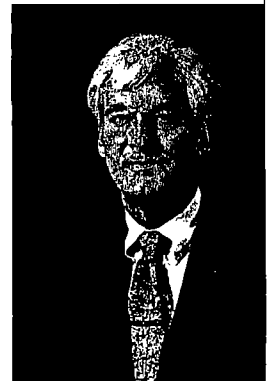
Our planning process included the decision to add more housing and support services to our current programs. Our Board is ready to take increased risks because of the many needs of those infected with or affected by HIV.

AFTA needs you to support the Board's plans for continue growth with a charitable contribution. We appreciate your past support and generosity and ask that you please give what you can when you are asked to participate in the 1997 Annual Housing Campaign Fund.

On behalf of the Board of Directors, thank you for being a member of our family.

Sincerely,

Thomas E. Baddley, Jr., Esq.
President, Board of Directors



Tom Baddley Named 1997 JCPenney Golden Rule Award Winner

A person's worth to a community or nation is no longer measured by his physical assets, but rather by his ability to render service to humanity.

- James Cash Penney, 1921

The JCPenney Golden Rule Awards were established to honor outstanding volunteer service by individuals and organizations.

Thomas E. Baddley, Jr., President of ATFA's Board of Directors, was named the 1997 JCPenney Golden Rule Award Winner at a luncheon at The Club on April 24, 1997.

Mr. Baddley was one of 53 persons or organizations from the Central Alabama area nominated for this award. The luncheon was attended by 400 persons where it was noted that "Under his leadership, ATFA has grown from an agency with a \$400,000 annual budget to one with a \$2.1 million annual budget. The organization has also expanded into housing and advocacy for persons living with HIV."

Mr. Baddley works endless hours, giving of his many talents and resources to help persons in Birmingham and the state of Alabama who are infected with or affected by HIV and in addressing the many complex issues relating to the AIDS epidemic. "We are, indeed, fortunate to have Tom as our leader since 1993. On behalf of the Board, staff and our clients, I thank him and congratulate him," said Randall Russell, ATFA's Executive Director.

For his outstanding volunteer services to ATFA, a \$1,000 check was donated to ATFA from JCPenney. Tom received a crystal sculpture and a certificate.

May 28, 1997

The Vice President
and Mrs. Gore
Office of The Vice President
Old Executive Office Building
Washington, DC 20500



NAPWA

**NATIONAL
ASSOCIATION
OF PEOPLE
WITH AIDS**

Dear Mr. Vice President and Mrs. Gore:

I am writing to invite you to our Commitment to Life luncheon and kick-off for the 1997 National HIV Testing Day Campaign. The luncheon will be held from 12:00 until 1:30 p.m. on June 23 at the National Press Club located at 14th & F Streets, N.W. Attending the lunch will be representatives of media, the medical and scientific community, pharmaceutical industry, government, AIDS advocates and service providers.

At the luncheon, NAPWA's *Life* award will be presented to Congressman Louis Stokes (D-Oh) in recognition of his commitment to health promotion, disease prevention and medical research. We hope that you will join us in recognizing his leadership in congress advocating on behalf of people living with HIV and to improve the health status of minority communities.

In 1995, NAPWA launched *National HIV Testing Day* (June 27) as an important health promotion campaign. The goal of the initiative is to engage more Americans to learn their HIV status, and seek appropriate prevention and health care services. NAPWA began this national campaign as part of its ongoing efforts to encourage participation in voluntary HIV antibody counseling and testing programs. Our partners in the effort are the Centers for Disease Control and Prevention, the National Alliance of State and Territorial AIDS Directors (NASTAD), the National Lesbian and Gay Health Association (NLGHA), Academy for Educational Development (AED), Mothers' Voices, Pediatric AIDS Foundation, and Planned Parenthood Federation of America. Agouron Pharmaceuticals has underwritten the cost of the lunch. Coors Brewing Company, SmithKline Beecham Consumer Healthcare, and Whitman-Walker Clinic have provided major funding for the National Testing Day Campaign.

It is clearly evident that HIV/AIDS prevention and treatment efforts have contributed to the decreasing numbers of AIDS deaths in this country. Taking an HIV test provides an opportunity for individuals to learn more than their HIV antibody status -- it is an opportunity to make well-informed health care choices and prevent the spread of HIV disease. The campaign seeks to outreach to women, youth and communities of color about their increased risk for undetected HIV. Unfortunately, minority communities are still often diagnosed long after disease has progressed and treatment is critical.

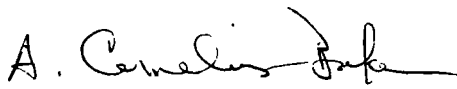
1413 K Street, N.W.,
Washington D.C. 20005
Phone: (202) 898-0414
FAX: (202) 898-0435

In the past two years, there have been significant research advances in the development of highly efficacious antiretroviral drugs (protease inhibitors). The efficacy of the new drugs combined with growing scientific opinion that early diagnosis and treatment of HIV disease can significantly alter future progression of HIV disease has heightened the interest in testing and counseling programs. The advent of Orasure™, an oral HIV antibody test device, and several home collection HIV test products have increased potential methods hard to reach populations and access points for HIV testing. This device is particularly useful in outreaching to minority populations who still harbor a mistrust of blood based testing caused by the Tuskegee Syphilis Study.

NAPWA is committed to a successful campaign which engages the American public in greater discussion of HIV disease risk -- and encourages testing. Enclosed is a set of materials from the 1997 campaign. Should you have any questions or to confirm your participation, your staff may contact me or Stacy Campbell at 202.898.0414.

I hope that you will join us in commending Congressman Stokes and communicating to the American public the importance of voluntary HIV testing as we all work together to end this epidemic.

Respectfully,

A handwritten signature in black ink, appearing to read "A. Cornelius Baker". The signature is fluid and cursive, with a long horizontal stroke at the end.

A. Cornelius Baker
Executive Director

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3791

Date Rcvd: 05-30-97

From: A. Cornelius Baker
NIAPWA

Staff Action:

Reviewed By Sandy: ✓ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

please schedule
connect
reopening
with
Stokes

Conflict !!
WA Connection
Women's Health

To Support Staff: _____

Date of Response: _____

n:\corresli

*Handling Mrs Stokes -
need to show him up*

May 28, 1997

The President
and Mrs. Clinton
The White House
Washington, DC 20500



NAPWA

**NATIONAL
ASSOCIATION
OF PEOPLE
WITH AIDS**

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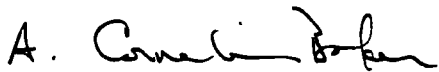
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NAPWA is committed to a successful campaign which engages the American public in greater discussion of HIV disease risk -- and encourages testing. Enclosed is a set of materials from the 1997 campaign. Should you have any questions, your staff may contact me or Stacy Campbell at 202.898.0414.

Your recent national apology to the survivors of the Tuskegee Syphilis Study and clarion call for an international effort for an HIV vaccine have heartened us in our ongoing efforts. With nearly 1 million Americans currently infected with HIV it is important that we do everything to encourage each individual to be tested and seek appropriate treatment. I hope that you will join us in commending Congressman Stokes and communicating to the American public the importance of voluntary HIV testing as we all work together to end this epidemic.

Respectfully yours,

A handwritten signature in black ink, appearing to read "A. Cornelius Baker". The signature is fluid and cursive, with a large initial "A" and a stylized "B" at the end.

A. Cornelius Baker
Executive Director



*The Association of State and Territorial Health Officials
requests the pleasure of your company*

at

a reception with state health officers.

Radisson Barceló Hotel Washington

Phillips Collection Ballroom

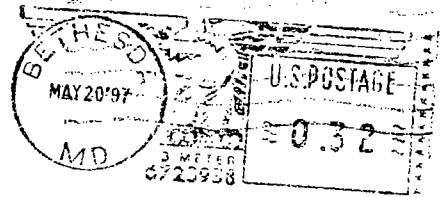
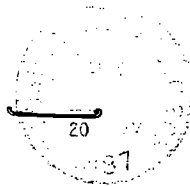
2121 P Street, NW

Washington, D.C.

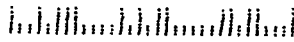
Wednesday, June 11, 1997

5:00 p.m. - 7:00 p.m.

R.S.V.P. 301/530-1619, ext. 10 by Friday, June 6, 1997.



Patricia S. Fleming
National AIDS Policy Coordinator
National AIDS Policy Office
750 17th Street, NW, Suite 1060, 729H
Washington, DC 20503



Association of State and Territorial Health Officials
1275 K Street, NW, Suite 800
Washington, DC 20005

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3793

Date Rcvd: 05-30-97

From: Ruth L. Kirschstein, M.D.
Department of Health & Human Services

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

Declined

To Support Staff: _____

Date of Response: _____

OFFICE OF THE DIRECTOR
NATIONAL INSTITUTES OF HEALTH
Telefax Transmittal

DATE: May 30, 1997

TO: Mrs. Dandy Murren

FAX NUMBER: 202-632-1096

TELEPHONE NUMBER: 202-632-1090

NUMBER OF PAGES INCLUDING COVER: 3

FROM: Janice Ramsden
Assistant to the Deputy Director
Office of the Director
Building 1, Room 235

Telefax Number: (301) 496-7451

Telephone Number: (301) 496-0959

REMARKS:



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Bethesda, Maryland 20892

May 30, 1997

Ms. Sandy Thurman
Director
Office of National AIDS Policy
Executive Office of the President
808 17th Street, N.W., 8th Floor
Washington, D.C. 20006

Dear Ms. Thurman:

Dr. Harold Varmus, Director, National Institutes of Health (NIH), and I would like to invite you to attend the next meeting of the Advisory Committee to the Director (ACD), NIH, on Thursday, June 5. The meeting is scheduled to begin at 8:30 a.m. and will be held in Building 31C, Conference Room 10. An agenda is enclosed. As you can see, there will be a series of presentations in regard to AIDS Activities starting at 10:30 a.m. We hope that you will be able to attend. If so, please contact my assistant who handles the arrangements for the ACD, Ms. Janice Ramsden, at (301) 496-0959. Ms. Ramsden will reserve a seat for you and assist you with parking arrangements, if needed.

If you have any questions about the meeting, please contact me at (301) 496-7322, or Ms. Ramsden at the number listed above.

Sincerely yours,

Ruth L. Kirschstein, M.D.
Deputy Director

Enclosure

**74th Meeting of the Advisory Committee to the Director
National Institutes of Health**

Thursday, June 5, 1997

***Building 31C, Conference Room 10
National Institutes of Health
Bethesda, Maryland***

TENTATIVE AGENDA

8:30 a.m. Welcome and Opening Remarks	Dr. Harold Varmus
9:30 a.m. Malaria Research	Dr. Harold Varmus Dr. John La Montagne
10:15 a.m. Break	
10:30 a.m. AIDS Activities	
--Vaccine Committee	Dr. David Baltimore
--NIH Vaccine Research Center	Dr. Harold Varmus Dr. William Paul Dr. Anthony Fauci Dr. George Vande Woude
--Drug Resistance Study	Dr. John Coffin
--AIDS Budget and Impact of Initiative	Dr. William Paul
12:00 p.m. Lunch	
1:15 p.m. Priority Setting	Dr. Stephen Katz Ms. Anne Thomas
2:15 p.m. Biomedical Research Careers	Dr. Marvin Cassman Dr. Elvera Ehrenfeld
--Report on New Investigators	
3:00 p.m. Study on Young Investigators	Dr. J. Richard McIntosh
3:30 p.m. Intramural Graduate Training	Dr. Michael Gottesman
4:00 p.m. Adjournment	

5/29/97

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3725

Date Rcvd: 05-05-97

From: David C. Harvey
Natl Organizations Responding to AIDS

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

If here - work
rec. Attending
ef.

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____



May 1, 1997

Sandy Thurman
Director
Office of National AIDS Policy
750 17th Street, NW
Suite 600
Washington, DC 20503

Co-chairs

David Harvey
AIDS POLICY CENTER FOR
CHILDREN, YOUTH AND
FAMILIES

Miguelina Maldonado
NATIONAL MINORITY AIDS
COUNCIL

Executive Committee

Val Bias
NATIONAL HEMOPHILIA
FOUNDATION

Callie Gass
NATIONAL AIDS FUND

Rose Gonzalez
AMERICAN NURSES
ASSOCIATION

Byron J. Harris
NATIONAL ALLIANCE OF
STATE AND TERRITORIAL
AIDS DIRECTORS

Christine Lubinski
AIDS ACTION COUNCIL

Jane Silver
AMERICAN FOUNDATION
FOR AIDS RESEARCH

Winnie Stachelberg
HUMAN RIGHTS CAMPAIGN

Dear Sandy:

Congratulations on your appointment to the position of National AIDS Policy Director. As the co-chairs of the National Organizations Responding to AIDS (NORA) coalition, we would like to invite you to speak at our next monthly meeting, which will be held on Monday, May 12th, from 12:30 pm to 2 pm. Our members would be interested in hearing about your take on the current state of AIDS policy and how best we can work with the Administration.

Our meetings are held in the first floor conference room at the offices of the Academy for Educational Development at 1255 23rd Street. A light buffet lunch is served.

Please feel free to contact either David C. Harvey at 202-785-3564 or Miguelina Maldonado at 202-483-6622 if you have any question about the meeting. We are enclosing some general information on NORA and a list of its members. We hope you will be able to join us for the May 12th NORA meeting, and we look forward to speaking with you soon.

Sincerely,

David C. Harvey
NORA Co-chair

Miguelina Maldonado
NORA Co-chair

NORA

A coalition convened by
AIDS Action Council

1875 Connecticut Ave., NW
Suite 700
Washington, DC 20009
202 986 1300
202 986 1345 fax

"A coalition of over 175 organizations responding to AIDS with resolve and action."



National Organizations Responding to AIDS

In order to more effectively respond to the multitude of public policy issues arising from the AIDS epidemic, a coalition of national organizations whose constituencies are affected by the epidemic convened in 1987. Over the past nine years, the National Organizations Responding to AIDS (NORA) coalition has grown to include over one hundred and seventy five groups committed to developing comprehensive, humane, and effective federal AIDS policy. NORA is the preeminent national coalition advocating on behalf of the needs of men, women and children affected by HIV/AIDS.

- NORA's diverse membership encompasses the medical, pediatric, public health, legal, education, and social service professions; religious, civil rights, labor, and children's organizations; families, people with AIDS, people of color and the organizations which serve them.
- Coordinated by the AIDS Action Council, NORA meets on a monthly basis to assess emerging AIDS policy and programmatic issues and to determine priorities for legislative and administrative action. Notable guest speakers at NORA meetings have included Dr. David Satcher, Director of the Centers for Disease Control and Prevention, National AIDS Policy Director Patsy Fleming, Dr. William Paul, Director of the Office of AIDS Research at the National Institutes of Health, UNAIDS Director Dr. Peter Piot, and Food and Drug Administration Commissioner Dr. David Kessler.
- NORA members engage in more comprehensive analysis of pending legislation and the development of new policy initiatives through work on NORA task forces, which are formed in response to emerging issues. In addition, each year the coalition publishes its funding recommendations on a broad array of AIDS-related federal programs, which are distributed to members of Congress, coalition members, and other interested parties.
- NORA has had a marked influence on the development of national policy in response to the growing demands of the AIDS epidemic. The NORA coalition was instrumental in the development and passage of the Ryan White CARE Act in 1990, and we continued to fight to ensure that it became reauthorized during the 104th Congress. The NORA coalition was also instrumental in blocking efforts to blockgrant the Medicaid program, defeating the Dornan provision which would have mandated the immediate discharge of HIV-positive military service members, and removing anti-HIV provisions in immigration reform legislation. The coalition has and will continue to be active in a number of different policy areas that affect those living with or at risk for HIV/AIDS during the 105th Congress.

NORA

A coalition convened by
AIDS Action Council

1875 Connecticut Ave., NW
Suite 700
Washington, DC 20009
202 986 1300
202 986 1345 fax

"A coalition of over 175 organizations responding to AIDS with resolve and action."

NATIONAL ORGANIZATIONS RESPONDING TO AIDS (NORA)
MEMBER ORGANIZATIONS

Academy for Educational Development
Advocates for Youth
AFL-CIO
AIDS Action Council
AIDS Drug Assistance Program Working Group
AIDS National Interfaith Network
AIDS Network of the Tri-State Area
AIDS Policy Center for Children, Youth and Families
Alan Guttmacher Institute
American Academy of Family Physicians
American Academy of Pediatrics
American Association for Marriage and Family Therapy
American Association of Dental Schools
American Association of Family and Consumer Sciences
American Association on Mental Retardation
American Bar Association
American Civil Liberties Union
American College Health Association
American College of Physicians
American Counseling Association
American Dental Hygienists Association
American Federation of State County and Municipal Employees
American Federation of Teachers
American Foundation for AIDS Research
American Friends Service Committee
American Health Care Association
American Health Information Management Association
American Hospital Association
American Jewish Committee
American Lung Association
American Medical Association
American Medical Student Association
American Nurses Association
American Optometric Association
American Psychiatric Association
American Psychological Association
American Public Health Association
American Red Cross
American Social Health Association
American Society of Internal Medicine
Americans for Democratic Action
Association for the Care of Children's Health
Association of Black Psychologists
Association of Maternal and Child Health Programs
Association of Nurses in AIDS Care
Association of Reproductive Health Professionals
Association of Schools of Public Health
Association of State and Territorial Health Officials
Biotechnology Industry Association
Broadway Cares/Equity Fights AIDS
Catholic Charities USA
Catholic Health Association of the United States
Center for Women Policy Studies

NORA MEMBER ORGANIZATIONS, CONT.

Child Welfare League of America
Children Affected by AIDS Foundation
Children's Defense Fund
Children's Hospital AIDS Program
Cities Advocating for Emergency AIDS Relief Coalition
City of Chicago - Washington Office
City of Dallas, Washington Office
City of New York
City of Philadelphia
Coalition for the Homeless
Committee for Children
Committee of Ten Thousand
Consortium of Social Science Associations
Council of Chief State School Officers
Council of Jewish Federations
Department of Health and Human Services
Design Industries Foundation for AIDS
Disability Rights Education and Defense Fund
Federation of Parents & Friends of Lesbians and Gays
Federation of Protestant Welfare Agencies
Funders Concerned About AIDS
Gay and Lesbian Medical Association
Global AIDS Action Network
Hospice Association of America
Human Rights Campaign
Infectious Diseases Society of America
Institute for Family-Centered Care
Intergovernmental Health Policy Project/George Washington University
International Association of Fire Fighters
Legal Action Center
Log Cabin Club
March of Dimes Birth Defects Foundation
Michigan Dept. of Health HIV/AIDS Prev. & Intervention
Mobilization Against AIDS
Mothers' Voices
National Advocacy Coalition on Youth and Sexual Orientation
National AIDS Fund
National AIDS Policy Office
National AIDS Treatment and Advocacy Program
National Alliance for the Mentally Ill
National Alliance of State & Territorial AIDS Directors
National Alliance to End Homelessness
National Assembly of State Arts Agencies
National Association for Home Care
National Association of Alcohol and Drug Abuse Counselors
National Association of Children's Hospitals & Related Institutions
National Association of Community Health Centers
National Association of Counties
National Association of County Health Officials
National Association of Medical Equipment Suppliers
National Association of Pediatric Nurse Associates and Practitioners
National Association of People with AIDS
National Association of Protection and Advocacy Systems
National Association of Public Hospitals and Health Systems
National Association of School Nurses

NORA MEMBER ORGANIZATIONS, CONT.

National Association of Social Workers
National Association of State Alcohol and Drug Abuse Directors
National Association of State Boards of Education
National Black Women's Health Project
National Catholic AIDS Network
National Coalition for the Homeless
National Coalition of Hispanic Health and Human Services Organizations
National Community Mental Healthcare Council
National Conference of State Legislatures
National Council for International Health
National Council of Jewish Women
National Council of La Raza
National Council on Alcoholism and Drug Dependence
National Council on HIV Disease
National Education Association
National Education Association Health Information Network
National Episcopal AIDS Coalition
National Family Planning and Reproductive Health Association
National Foundation for Infectious Diseases
National Gay and Lesbian Task Force
National Health Care for the Homeless Council
National Health Law Program
National Hemophilia Foundation/DC Office
National Hospice Organization
National Latino/a Lesbian and Gay Organization
National Lesbian and Gay Health Association
National Mental Health Association
National Minority AIDS Council
National Native American AIDS Prevention Center
National Network for Youth
National Parent-Teachers Association, The
National Presbyterian AIDS Network
National Puerto Rican Coalition
National Task Force on AIDS Prevention
National Urban Coalition
National Urban League
National Women and HIV/AIDS Project
National Women's Health Network
National Women's Health Resource Center
National Women's Law Center
New York State Dept. of Health AIDS Institute
New York State Office of Federal Affairs
Office of National AIDS Policy Director
Oncology Nursing Society
Pan American Health Association
Partnership for the Homeless
Pediatric AIDS Foundation
Pettus-Crowe Foundation
Planned Parenthood Federation of America
Population Services International
Porter Novelli
Presbyterian Church USA
Project Inform
Religious Action Center c/o Union of American Hebrew Congregations
Service Employees International Union

NORA MEMBER ORGANIZATIONS, CONT.

Sex Information and Education Council of the U.S.
Society for the Advancement of Women's Health Research
St. Francis Center
TB/AIDS Citizen Action Group
The Sheridan Group/Title IIIb Coalition
Therapeutic Communities of America
Treatment Action Group
United Food and Commercial Workers International Union
United Jewish Appeal-Federation of New York
United States Conference of Mayors
University of Medicine and Dentistry of New Jersey
World Health Organization

Revised February 1997

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H.R. Shepherd*Dedicated to disease prevention*

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Rick CurranScientific Program Associate
John Z. Mennone, M.P.H.**FAX TRANSMITTAL**TO: DANIEL MONTOYAFROM: RICK CURRANDATE: 5/9/97RE: MAURICE HILLEMANN Press Briefing & DinnerMESSAGE: WE ARE PLEASED MS. THURMAN WILL ATTEND,Attached is a copy of our
invitation, a press release about
Dr. Hilleman & a listing about the
Press Briefing & its speakers &
Content. Please call with questions

NUMBER OF PAGES
(INCLUDES COVER): 5IF THERE IS A PROBLEM WITH THIS FAX TRANSMISSION,
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203 966-4763 Fax
info@sabin.org (E-mail)

The Albert B. Sabin Vaccine Foundation
invites you to join your distinguished colleagues
as we present

Dr. Maurice R. Hilleman

with the

Sabin Gold Medal

and

Lifetime Achievement Award
on Tuesday, the thirteenth of May
nineteen hundred and ninety-seven

at six-thirty in the evening

Four Seasons Hotel

Dumbarton Room

Washington, D. C.

Cocktail reception - 6:30 pm

Business attire suggested

Dinner - 8 o'clock

Albert B.

SABIN

Vaccine

FOUNDATION*Dedicated to disease prevention*

April 14, 1997

NEWS RELEASE

Contact: Rick Curran

Director, Communications

Phone: (203) 972-7907

E-mail: rcurran@sabin.org

**TOP VACCINE SCIENTIST RESPONSIBLE FOR MORE
VACCINES THAN ANY OTHER TO RECEIVE
ALBERT B. SABIN GOLD MEDAL AND
AWARD FOR LIFETIME ACHIEVEMENT**

NEW CANAAN, CT - Dr. Maurice R. Hilleman, the scientist credited with the development of more vaccines than any other person, and recognized for saving tens of millions of lives worldwide, will receive the Albert B. Sabin Gold Medal in a special ceremony next month in Washington, D.C.

Considered by many to have contributed more to disease prevention than such notable pioneer vaccine scientists as Jenner, Pasteur and Salk, Dr. Hilleman, Director of the Merck Institute for Therapeutic Research, will receive the Sabin Gold Medal and the Lifetime Achievement Award of the Albert B. Sabin Vaccine Foundation at a tribute May 13 at the Four Seasons Hotel. The Foundation honors the medical scientist that created the oral polio vaccine, and is dedicated to preventing deadly diseases through advances in vaccine development and delivery. The timing of the award ceremony coincides with the 25th anniversary of Dr. Hilleman's development of the first conjugate vaccine, one which protects infants from measles, mumps and rubella (MMR).

According to Foundation Chairman H.R. Shepherd, the Albert B. Sabin Gold Medal is awarded annually to honor and recognize a person who has made exemplary contributions to the field of vaccinology. He said the Sabin Foundation's Lifetime Achievement Award is presented periodically to honor an individual - who over the course of their life's work - has "transcended standards of excellence, achieving extraordinary and exemplary accomplishments that confer distinguished status amongst his or her colleagues." Dr. Hilleman is the first person to ever receive the two awards concurrently, Shepherd noted.

"Dr. Maurice Hilleman is one man who has likely saved more lives than any other living scientist," said Shepherd. "His contributions to science and his fellow man are extraordinary,

his accomplishments astounding and his dedication to disease prevention unprecedented. He, perhaps more than anyone else, has dedicated his life to the same principle that Dr. Sabin so gloriously achieved: to fully realize the enormous potential of vaccination to prevent disease."

In a 50-year career which includes ten years in government and 40 years in the private sector, Dr. Hilleman, a Montana native, pioneered the development of numerous live, killed and combined vaccines including those for measles, mumps, rubella, Marek's Disease, hepatitis A, hepatitis B, adenoviruses and the commercial evolution of vaccines for meningococci and pneumococci. He is the author of 460 original articles in the fields of virology, immunology, epidemiology and infectious diseases. Dr. Hilleman serves on numerous national and international advisory boards and committees, and has been a member of the Expert Advisory Panel of the World Health Organization since 1952.

In addition, Dr. Hilleman is an elected member of the U.S. National Academy of Sciences, the American Academy of Arts and Sciences, and the Institute of Medicine of the National Academy of Sciences. In the 1980s, he received the National Medal of Science from President Ronald Reagan, and is also an appointed member of the National Vaccine Advisory Committee of the National Vaccine Program. Dr. Hilleman has been honored by numerous foreign governments and public and private sector organizations and foundations. He received his B.S. degree from Montana State University in 1941 and his Ph.D. from the University of Chicago in 1944.

Dr. Hilleman will receive the Albert B. Sabin Gold Medal from presenters Dr. Philip K. Russell of Johns Hopkins University and Founding President of the Sabin Foundation, and the late Dr. Sabin's widow, Mrs. Heloisa Sabin. The Foundation's Lifetime Achievement Award will be presented by Dr. Anthony Fauci of the National Institutes of Health. Also speaking at the ceremony will be Dr. David Satcher, Director for the federal Centers for Disease Control and Prevention.

The Albert B. Sabin Vaccine Foundation, headquartered in New Canaan, Connecticut, honors the medical scientist that created the oral polio vaccine. The Foundation's unique mission is to prevent deadly disease by promoting advances in vaccines and immunization. In its work, the Sabin Foundation connects caring people with the understanding and resources to save lives.

The Albert B. Sabin Vaccine Foundation

71 Elm Street

New Canaan, CT 06840

Phone: (203) 972-7907 Fax: (203) 966-4763 E-mail: info@sabin.org

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From: H. R. Shepherd
Albert B. Sabin Vaccine Foundation

Schelder

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if need to
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Vaccine **FOUNDATION**

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Scientific Program Associate
John Z. Mennone, M.P.H.

May 1, 1997

Ms. Sandra Thurman
White House AIDS Policy Advisor
The White House
Washington, DC 20500

Dear Ms. Thurman:

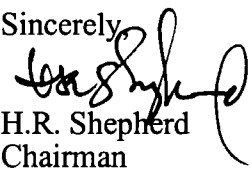
Your recent interview in the *Washington Post* contained much of the passion and commitment that has become your hallmark. We were especially pleased to read your comments concerning an AIDS vaccine, something that we have been working to encourage for quite some time.

You received from us some time ago an invitation to join an event of extraordinary significance for vaccine research. On May 13th at the nearby Four Seasons Hotel in Georgetown, we will award a Lifetime Achievement Award to Dr. Maurice Hilleman, the most prolific vaccine scientist in history. Present at that event will be an extraordinary group of vaccine science, public health and industry leaders. So many, in fact, that we are conducting a scientific briefing beforehand that national news media are attending in large numbers.

Our invitation stands. If a change of circumstance occurs that allows you to join us, even briefly, your presence will, we think, be very mutually beneficial.

Meanwhile, we shall arrange a visit to brief you on our AIDS Vaccine Consortium progress.

Sincerely,


H.R. Shepherd
Chairman

HRS/jr

71 Elm Street
New Canaan, CT 06840
203 972-7907 Telephone
203 966-4763 Fax
info@sabin.org (E-mail)

Albert B.

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VACCINES: A DELICATE FABRIC OF COLLABORATION

VACCINE PRESS BRIEFING

May 13, 1997

Four Seasons Hotel, Washington D.C.

Douglass Room, 5-6 pm

OUTLINE PARTICIPANTS & CONTENT

Participant

Dr. Philip K. RussellProfessor, Johns Hopkins University
Founding President, Sabin Vaccine Foundation

Moderator

Discussion Topics

Dr. D.A. Henderson

Professor, Johns Hopkins University

Dr. Maurice Hilleman

Director, Merck Institute of Therapeutics

Dr. Gordon Douglas

President, Merck & Co. Vaccine Division

Dr. Anthony FauciDirector, National Institutes of
Allergy and Infectious Diseases
National Institutes of Health**Dr. Reinhard Kurth**Director, Paul Erlich Institute
Germany**Dr. Robert Gallo**Director, Institute for Human Virology
University of Maryland**Dr. Max Essex**Chairman, Harvard AIDS Institute
Harvard University**Dr. Philip K. Russell**Professor, Johns Hopkins University
Founding President, Sabin Vaccine Foundation

- ★ Old Vaccines: Smallpox, Polio, Measles/Mumps/Rubella (MMR)
- ★ New Vaccines in the pipeline, major developments on the horizon - New chicken pox vaccine, Lyme disease, human papilloma virus
- ★ NIH basic research, government working in key role and partnership with private sector, academia, private research
- ★ AIDS vaccines: how do we get there, what new technologies could make this happen, how close are we, promising developments, U.S. and International perspectives? Power of prevention - treatments costly and difficult to comply with - a vaccine would prevent additional infections for a fraction of the cost
- ★ Brief summary, open Q&A

VACCINES: A DELICATE FABRIC OF COLLABORATION

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Dr. Gordon Douglas

President, Merck & Co. Vaccine Division

Dr. Geoffrey Schild

Director, National Institute
for Biological Standards and Controls

Great Britain

Dr. Anthony Fauci

Director, National Institutes of
Allergy and Infectious Diseases

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Germany

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University of Maryland

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Chairman, Harvard AIDS Institute
Harvard University

Dr. Philip K. Russell

Professor, Johns Hopkins University
Founding President, Sabin Vaccine Foundation

Discussion Topics

- *Old Vaccines: Smallpox, Polio, Measles/Mumps/Rubella (MMR)*
- *New vaccines in the pipeline, major developments on the horizon - New chicken pox vaccine, Lyme disease, human papilloma*
- *New flu vaccines, impact of flu immunization on 1996-97 flu season morbidity and mortality*
- *NIH basic research, government working in key role and partnership with private sector, academia, private research*
- *AIDS vaccines: how do we get there, what new technologies could make this happen, how close are we, promising developments, U.S. and International perspectives. Power of prevention - treatments costly and difficult to comply with - a vaccine would prevent additional infections for a fraction of the cost*
- *Brief summary, open Q&A*

A Bold Stroke to Eradicate AIDS

by H.R. Shepherd

The news that the AIDS death rate in the U.S. declined for the first time ever last year raised hopes that we may have rounded a critical corner in our battle against the viral plague. But while the news was indeed welcome, the reduced sense of urgency it created poses grave dangers. Yes, the death toll declined in the U.S., but AIDS continues to claim 1.5 million lives annually worldwide. And 3 million people become newly infected with AIDS each year. The plague continues to expand.

The unabated spread of AIDS points to a single imperative: we must develop vaccines that will serve as the Bold Stroke to prevent and eradicate this dread disease.

American political leaders have awakened to this truth. President Clinton noted in his 1997 State of the Union address, "that every year we move up the discovery of an AIDS vaccine, we'll save millions of lives around the world." He called for "new resources" to enable the National Institutes of Health (NIH) to "become the most powerful discovery engine for an AIDS vaccine." Last January, he appointed eminent scientist David Baltimore, a Nobel Laureate, to lead a national effort to develop AIDS vaccines. These are positive steps. But to accelerate the development of AIDS vaccines will require a more broad-based effort, one that brings together the best and brightest minds from government, industry and academic research laboratories in common pursuit of a vaccine.

We cannot look to less developed countries that are the hardest hit by AIDS, and most desperate for a vaccine, to discover one. Developing nations spent \$10 billion on AIDS in 1995 but only \$5 million of that went to vaccine research. An intensified search for an AIDS vaccine must be led by the United States. The U.S. is the world leader in medical innovation. American biopharmaceutical companies accounted for nearly two-thirds of all new drugs introduced worldwide from 1940 to 1988. It was the synergistic relationship between U.S. academic research centers, the National Foundation for Infantile Paralysis (now called the March of Dimes), and drug manufacturers that produced the vaccines that eradicated polio.

Another industry in which the U.S. is the world leader -- semiconductor development and production -- provides a model for the AIDS vaccine research effort we must immediately undertake. The U.S. invented semiconductors, the microchips that are the "brains" of computers. But by the mid-1980s, foreign competitors had wrested leadership of this cutting-edge industry from the U.S. American business, military and political leaders grew concerned that dependence on foreign microchip suppliers would weaken U.S. economic competitiveness and threaten our national defense. They determined to join forces to conduct research aimed at regaining and protecting U.S. leadership in semiconductor manufacturing technology. In 1987, they formed a non-profit, industry-driven research and development consortium called SEMATECH.

- 2 -

The SEMATECH example is instructive because it has been enormously effective in achieving its goals. SEMATECH brings 10 semiconductor manufacturers -- spirited competitors -- together with academic and government researchers to develop advanced manufacturing processes. From 1988 through 1995, the member companies and the Federal government shared the cost of SEMATECH. Member companies now shoulder all of the costs. The cooperative approach of the consortium provides for more efficient use of research and development funds, better coordination between industry, academic and government laboratories, and more widespread use of state-of-the-art manufacturing technology by American industry.

The results spawned by SEMATECH are readily apparent. Today the American semiconductor industry is again the world leader. Consortium members such as Hewlett-Packard, Intel, IBM and Motorola set the global standards in their respective markets. The national security payoff was demonstrated by U.S. forces' technological superiority in the Persian Gulf War.

If we are to eradicate AIDS, we must have the type of leadership and cooperation that enabled SEMATECH to produce such extraordinary results. It is urgent that everyone pursuing development of an AIDS vaccine work together, including government laboratories such as NIH, university and independent research institutions, and pharmaceutical and biotechnology companies. A united effort will ensure the most efficient use of research dollars by avoiding duplicative efforts. It will allow the foremost scientific talent to collaborate to find the keys to prevent the spread of the incredibly complex AIDS virus.

Private sector drug discovery companies must be given incentives to invest more resources in AIDS vaccine research, a pursuit fraught with risks. AIDS is so different from other diseases that scientists cannot use tried-and-true methods of vaccine development. Instead, they must grope in darkness to solve the puzzle. Numerous prospective vaccines already have been tried and failed. Despite the desperate need for a vaccine, companies are understandably reluctant to commit much money to a project with so little prospect of success. Neither can government shoulder this burden alone. Only recently did Federal spending on vaccine research climb above 10% of the \$1.5 billion spent on AIDS.

Pharmaceutical and biotechnology company involvement is essential for more than financial reasons. They are the engines of drug discovery. Over 90% of all drug patents come from the private sector.

Additionally, we must have strong political leadership to build public support for an unprecedented effort to develop a vaccine. President Clinton must continue to speak out, to explain to the American people how the global spread of AIDS threatens us, and how all of us, not just those most at-risk, will benefit when AIDS can be prevented. Other political leaders must break their silence on this subject and unite behind this effort. They should recall our nation's success in the 1960s when we concentrated our resources to land on the moon.

- 3 -

Concurrent with the vaccine discovery effort must be development of a sound plan for distribution of an AIDS vaccine. This cannot wait until a vaccine is discovered. Ninety percent of the people with AIDS live in Third World countries. In other words, those who need an AIDS vaccine the most are those least able to pay for it. The World Bank already has begun a commendable effort to induce countries to commit in advance to buy a vaccine. Numerous philanthropic foundations now grant millions of dollars to AIDS research and treatment. They should pledge to purchase an AIDS vaccine and provide it to people throughout the world who can't afford it. Such financial commitments will encourage pharmaceutical and biotech companies to invest more in AIDS vaccine research. And, planning the vaccine distribution now will ensure that it reaches people rapidly.

Vaccines are the most effective and least expensive medical interventions ever devised. They stop epidemics and prevent diseases; polio and smallpox are notable examples. They obviate treatment costs. A Rockefeller Foundation scientific panel estimated it will cost \$600 million to develop an AIDS vaccine. With AIDS killing 1 million people and costing the global economy over \$100 billion a year, it is abundantly clear that creating an AIDS vaccine should be one of the world's highest priorities.

The SEMATECH model shows how academia, government and industry can work together to produce great scientific and commercial achievements. The Manhattan Project and moon landing proved it in the past. Now we must put aside our differences and egos and unite behind a cooperative effort to develop a vaccine that will end the plague of AIDS.

- 30 -

H.R. Shepherd is Chairman of the Albert B. Sabin Vaccine Foundation in New Canaan, Conn. A scientist and retired Chief Executive Officer of Armstrong Pharmaceuticals, he developed the aerosol inhaler for asthma medication.

Want appot. — Eric wants to be included.

Award Ceremony - May 13th -
 Margaret Lee Mason

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3714

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From: H. R. Shepherd

Albert B. Sabin

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Rick Curran

Scientific Program Associate

John Z. Mennone, M.P.H.

FAX TRANSMITTAL**TO:** Mrs. Sandra Thurman**FROM:** H. R. Shepherd**DATE:** 5/1/97**RE:** Letter and Enclosures which follow -**MESSAGE:** _____**NUMBER OF PAGES**
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May 1, 1997

Ms. Sandra Thurman
White House AIDS Policy Advisor
The White House
Washington, DC 20500

Dear Ms. Thurman:

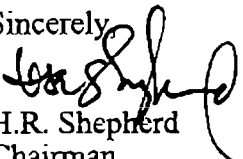
Your recent interview in the *Washington Post* contained much of the passion and commitment that has become your hallmark. We were especially pleased to read your comments concerning an AIDS vaccine, something that we have been working to encourage for quite some time.

You received from us some time ago an invitation to join an event of extraordinary significance for vaccine research. On May 13th at the nearby Four Seasons Hotel in Georgetown, we will award a Lifetime Achievement Award to Dr. Maurice Hilleman, the most prolific vaccine scientist in history. Present at that event will be an extraordinary group of vaccine science, public health and industry leaders. So many, in fact, that we are conducting a scientific briefing beforehand that national news media are attending in large numbers.

Our invitation stands. If a change of circumstance occurs that allows you to join us, even briefly, your presence will, we think, be very mutually beneficial.

Meanwhile, we shall arrange a visit to brief you on our AIDS Vaccine Consortium progress.

Sincerely,


H.R. Shepherd
Chairman

HRS/jr

71 Elm Street
New Canaan, CT 06840
203 972-7907 Telephone
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info@sabin.org (E-mail)

VACCINES: A DELICATE FABRIC OF COLLABORATION

VACCINE PRESS BRIEFING

May 13, 1997

Four Seasons Hotel, Washington D.C.

Douglass Room, 5-6 pm

OUTLINE PARTICIPANTS & CONTENT

Participant

Dr. Philip K. Russell Moderator
Professor, Johns Hopkins University
Founding President, Sabin Vaccine Foundation

Discussion Topics

- | | |
|---|--|
| <p>Dr. D.A. Henderson
Professor, Johns Hopkins University</p> <p>Dr. Maurice Hilleman
Director, Merck Institute of Therapeutics</p> <p>Dr. Gordon Douglas
President, Merck & Co. Vaccine Division</p> <p>Dr. Geoffrey Schild
Director, National Institute
for Biological Standards and Controls
Great Britain</p> <p>Dr. Anthony Fauci
Director, National Institutes of
Allergy and Infectious Diseases
National Institutes of Health</p> <p>Dr. Reinhard Kurth
Director, Paul Erlich Institute
Germany</p> <p>Dr. Robert Gallo
Director, Institute for Human Virology
University of Maryland</p> <p>Dr. Max Essex
Chairman, Harvard AIDS Institute
Harvard University</p> <p>Dr. Philip K. Russell
Professor, Johns Hopkins University
Founding President, Sabin Vaccine Foundation</p> | <ul style="list-style-type: none">• <i>Old Vaccines: Smallpox, Polio, Measles/Mumps/Rubella (MMR)</i>• <i>New vaccines in the pipeline, major developments on the horizon - New chicken pox vaccine, Lyme disease, human papilloma</i>• <i>New flu vaccines, impact of flu immunization on 1996-97 flu season morbidity and mortality</i>• <i>NIH basic research, government working in key role and partnership with private sector, academia, private research</i>• <i>AIDS vaccines: how do we get there, what new technologies could make this happen, how close are we, promising developments, U.S. and International perspectives. Power of prevention - treatments costly and difficult to comply with - a vaccine would prevent additional infections for a fraction of the cost</i>• <i>Brief summary, open Q&A</i> |
|---|--|

A Bold Stroke to Eradicate AIDS

by H.R. Shepherd

The news that the AIDS death rate in the U.S. declined for the first time ever last year raised hopes that we may have rounded a critical corner in our battle against the viral plague. But while the news was indeed welcome, the reduced sense of urgency it created poses grave dangers. Yes, the death toll declined in the U.S., but AIDS continues to claim 1.5 million lives annually worldwide. And 3 million people become newly infected with AIDS each year. The plague continues to expand.

The unabated spread of AIDS points to a single imperative: we must develop vaccines that will serve as the Bold Stroke to prevent and eradicate this dread disease.

American political leaders have awakened to this truth. President Clinton noted in his 1997 State of the Union address, "that every year we move up the discovery of an AIDS vaccine, we'll save millions of lives around the world." He called for "new resources" to enable the National Institutes of Health (NIH) to "become the most powerful discovery engine for an AIDS vaccine." Last January, he appointed eminent scientist David Baltimore, a Nobel Laureate, to lead a national effort to develop AIDS vaccines. These are positive steps. But to accelerate the development of AIDS vaccines will require a more broad-based effort, one that brings together the best and brightest minds from government, industry and academic research laboratories in common pursuit of a vaccine.

We cannot look to less developed countries that are the hardest hit by AIDS, and most desperate for a vaccine, to discover one. Developing nations spent \$10 billion on AIDS in 1995 but only \$5 million of that went to vaccine research. An intensified search for an AIDS vaccine must be led by the United States. The U.S. is the world leader in medical innovation. American biopharmaceutical companies accounted for nearly two-thirds of all new drugs introduced worldwide from 1940 to 1988. It was the synergistic relationship between U.S. academic research centers, the National Foundation for Infantile Paralysis (now called the March of Dimes), and drug manufacturers that produced the vaccines that eradicated polio.

Another industry in which the U.S. is the world leader -- semiconductor development and production -- provides a model for the AIDS vaccine research effort we must immediately undertake. The U.S. invented semiconductors, the microchips that are the "brains" of computers. But by the mid-1980s, foreign competitors had wrested leadership of this cutting-edge industry from the U.S. American business, military and political leaders grew concerned that dependence on foreign microchip suppliers would weaken U.S. economic competitiveness and threaten our national defense. They determined to join forces to conduct research aimed at regaining and protecting U.S. leadership in semiconductor manufacturing technology. In 1987, they formed a non-profit, industry-driven research and development consortium called SEMATECH.

- 2 -

The SEMATECH example is instructive because it has been enormously effective in achieving its goals. SEMATECH brings 10 semiconductor manufacturers -- spirited competitors -- together with academic and government researchers to develop advanced manufacturing processes. From 1988 through 1995, the member companies and the Federal government shared the cost of SEMATECH. Member companies now shoulder all of the costs. The cooperative approach of the consortium provides for more efficient use of research and development funds, better coordination between industry, academic and government laboratories, and more widespread use of state-of-the-art manufacturing technology by American industry.

The results spawned by SEMATECH are readily apparent. Today the American semiconductor industry is again the world leader. Consortium members such as Hewlett-Packard, Intel, IBM and Motorola set the global standards in their respective markets. The national security payoff was demonstrated by U.S. forces' technological superiority in the Persian Gulf War.

If we are to eradicate AIDS, we must have the type of leadership and cooperation that enabled SEMATECH to produce such extraordinary results. It is urgent that everyone pursuing development of an AIDS vaccine work together, including government laboratories such as NIH, university and independent research institutions, and pharmaceutical and biotechnology companies. A united effort will ensure the most efficient use of research dollars by avoiding duplicative efforts. It will allow the foremost scientific talent to collaborate to find the keys to prevent the spread of the incredibly complex AIDS virus.

Private sector drug discovery companies must be given incentives to invest more resources in AIDS vaccine research, a pursuit fraught with risks. AIDS is so different from other diseases that scientists cannot use tried-and-true methods of vaccine development. Instead, they must grope in darkness to solve the puzzle. Numerous prospective vaccines already have been tried and failed. Despite the desperate need for a vaccine, companies are understandably reluctant to commit much money to a project with so little prospect of success. Neither can government shoulder this burden alone. Only recently did Federal spending on vaccine research climb above 10% of the \$1.5 billion spent on AIDS.

Pharmaceutical and biotechnology company involvement is essential for more than financial reasons. They are the engines of drug discovery. Over 90% of all drug patents come from the private sector.

Additionally, we must have strong political leadership to build public support for an unprecedented effort to develop a vaccine. President Clinton must continue to speak out, to explain to the American people how the global spread of AIDS threatens us, and how all of us, not just those most at-risk, will benefit when AIDS can be prevented. Other political leaders must break their silence on this subject and unite behind this effort. They should recall our nation's success in the 1960s when we concentrated our resources to land on the moon.

- 3 -

Concurrent with the vaccine discovery effort must be development of a sound plan for distribution of an AIDS vaccine. This cannot wait until a vaccine is discovered. Ninety percent of the people with AIDS live in Third World countries. In other words, those who need an AIDS vaccine the most are those least able to pay for it. The World Bank already has begun a commendable effort to induce countries to commit in advance to buy a vaccine. Numerous philanthropic foundations now grant millions of dollars to AIDS research and treatment. They should pledge to purchase an AIDS vaccine and provide it to people throughout the world who can't afford it. Such financial commitments will encourage pharmaceutical and biotech companies to invest more in AIDS vaccine research. And, planning the vaccine distribution now will ensure that it reaches people rapidly.

Vaccines are the most effective and least expensive medical interventions ever devised. They stop epidemics and prevent diseases; polio and smallpox are notable examples. They obviate treatment costs. A Rockefeller Foundation scientific panel estimated it will cost \$600 million to develop an AIDS vaccine. With AIDS killing 1 million people and costing the global economy over \$100 billion a year, it is abundantly clear that creating an AIDS vaccine should be one of the world's highest priorities.

The SEMATECH model shows how academia, government and industry can work together to produce great scientific and commercial achievements. The Manhattan Project and moon landing proved it in the past. Now we must put aside our differences and egos and unite behind a cooperative effort to develop a vaccine that will end the plague of AIDS.

- 30 -

H.R. Shepherd is Chairman of the Albert B. Sabin Vaccine Foundation in New Canaan, Conn. A scientist and retired Chief Executive Officer of Armstrong Pharmaceuticals, he developed the aerosol inhaler for asthma medication.

Office of
National AIDS Policy

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April 8, 1997

Ms. Sandra Thurman
White House AIDS Policy Advisor
The White House
Washington, DC 20500

Dear Ms. Thurman:

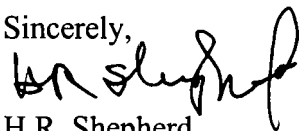
Congratulations to you, and to all of us, on your appointment. Your record of commitment provides strong encouragement for our shared goal of an AIDS vaccine.

Enclosed is a copy of our submission to PACHA on the day your appointment was announced. Also an opinion editorial which we hope will soon be published in the national media.

We hope to follow up on communications with your predecessor, Dr. Patricia Fleming, by building a prompt and constructive working relationship with you. We would like to schedule an appointment as soon as practical to brief you on our efforts in engaging the major vaccine companies in a consortium that is focused on results and not rhetoric.

Meanwhile, I'm pleased to invite you to join us in honoring the world's most prolific vaccine scientist, Dr. Maurice Hilleman. This would be a wonderful occasion for you to meet leaders of vaccine science and industry, and for them to see your interest in efforts toward an AIDS vaccine.

Sincerely,



H.R. Shepherd
Chairman

HRS/jr

Enclosures: WSJ Editorial and Letter to Editor
"We want to make.....
Opinion Editorial to Washington Post
Letter to PACHA
Invitation

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Dedicated to disease prevention

How You Can Help: Specific Giving Opportunities

The Sabin Foundation is capable of saving lives by promoting advances in vaccine science, policy, delivery and education. Millions of lives.

Young and modestly funded, yet treading in the company of enormous organizations and world forces, the Sabin Foundation seeks never to duplicate, much less mimic, the efforts of others. Indeed, we seek to fulfill a fresh and constructively provocative role.

Through wide-ranging project initiatives, and its own ongoing programs, the Sabin Foundation every day seeks to build an even stronger voice for the quiet saving of lives.

We rely entirely on voluntary gifts and grants by those who share our vision of a world freed from deadly diseases. Fortunately, experience has shown there are many who possess both the extraordinary financial and intellectual means to support the invisible mission of prevention.

We especially encourage Sabin Foundation donors to consider the extraordinary benefits of:

- Gifts that reduce capital gains or estate taxes
- Charitable Gift Annuities, and Deferred Gift Annuities to build retirement income
- Life Income Programs through Charitable Remainder Trusts
- Gifts of Appreciated Securities, Real Estate or Personal Property
- Thoughtful Testamentary Gift Planning

We can achieve more by working together.

Dr. Albert B. Sabin

While the extraordinary preventative power of vaccines is inherently silent, and often overlooked, we cannot afford to be complacent. Please take a moment to respond with your thoughts about our mission, or to request information that will broaden your knowledge about vaccines.

We invite you to join the Sabin Society, with a contribution of \$100 or more, so we may keep you informed about our activities, and new developments in vaccinology and immunization. To be included on our list for future mailings, including our Vaccine Vision newsletter, please fill out the information below. New Sabin Society members will receive a free copy of one of many informative publications related to the prevention of disease through vaccines and immunization. Please indicate your selection.

☐ **Yes, I am dedicated to disease prevention and want to join the Sabin Society.**

Enclosed please find my tax-deductible contribution for:

☐ \$1,000 ☐ \$500 ☐ \$250 ☐ \$100 ☐ Other \$_____ Amount

Name: _____ Telephone () _____

Organization (If Appropriate): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

As a new Sabin Society member, please send my complimentary copy of:

- ☐ *A Crack in the Shield: Our Unvaccinated Children*, by Ann Fettner
- ☐ *Viruses: Agents of Change*, by Ann Fettner
- ☐ *The Hot Zone*, Richard Preston's best selling true story of the 1989 Ebola virus outbreak in the United States
- ☐ *State of the World's Vaccines and Immunization*, by UNICEF and the World Health Organization
- ☐ *Microbe Hunters*, by Paul deKruif
- ☐ *Albert B. Sabin, M.D.: A Life in Science*, a 30-minute VHS format videotape

Please mail this completed form and your contribution to:

Albert B. Sabin Vaccine Foundation
71 Elm Street
New Canaan, CT 06840

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Stimulating Progress, Advocating Sound Policy, Educating the Public

The activities listed below represent only a portion of total Foundation efforts, but illustrate the variety, scope and comprehensiveness of our dedication to disease prevention.

Stimulating Progress

- Grants to enhance vaccine development and delivery
- Sabin Vaccine Colloquia - Some past topics include "Planning for the Next Generation of Vaccines," "Vaccine Development and Delivery in the Era of Managed Care," "AIDS Vaccine Initiative: The Sabin Foundation's Role in Developing an AIDS Vaccine" and "Case Studies in Vaccine Development."
- Co-sponsorship of Harvard AIDS Institute Annual Conferences
- Sabin Post-Doctoral Fellowships - Awarded to individuals engaged in work dedicated to vaccine development and delivery
- The Albert B. Sabin Gold Medal - Recognizes and honors those who have made exemplary contributions to the field of vaccinology. 1994 - Dr. Donald A. Henderson, Johns Hopkins University; 1995 - Dr. Robert M. Chanock, National Institutes of Health; 1996 - Joseph L. Melnick, Ph.D., Baylor University; 1997 - Dr. Maurice Hilleman, Merck & Co.
- Scientific Publications published, sponsored or supported by the Foundation include: "Vaccine Vision" newsletter, "A Crack in the Shield: Our Unvaccinated Children," "The Hot Zone," "State of the World's Vaccines and Immunization," "Networks of Innovation: Vaccine Development at Merck, Sharp & Dohme, and Mulford (1895-1995)," "The Search for an AIDS Vaccine," "The Economic Impact of AIDS: The Direct and Indirect Costs of AIDS and HIV," "Achieving the Promise: Increasing Investment in Vaccine Development" and "The Vaccines for Children Program: A Critique."

*...also a human being cannot rest while knowing
that his work is resting on the shelf."*

Dr. Albert B. Sabin

Advocating Sound Policy

- Vaccine Financing Initiative, a project with Aetna
- Statewide study with the University of Connecticut and the Connecticut Peer Review Organization to improve senior citizen pneumococcal pneumonia immunization
- Brandeis University studies on The Economic Impact of AIDS, and The Psychological/Sociological Impact of AIDS
- Promoting greater sponsorship of vaccines by HMOs, Managed Care Companies and Health Insurers
- Publication of "Forging New Connections: Vaccine Development and Delivery in the Era of Managed Care"

Educating the Public

- Strategic Outreach through press releases, editorials, articles, position papers, brochures and handbooks, letters, public service announcements and advertising
- Targeted Special Events
- Internet Website
- Speaking engagements
- Sponsorship of children's television programming dedicated to immunization

Top Foundation Priorities

- *Advocating cooperation amongst scientific, industry and government sectors for the development of a safe, effective AIDS vaccine; building a plan for public appreciation and acceptance of AIDS immunization*
- *Spearheading a National Immunization Awareness Campaign*

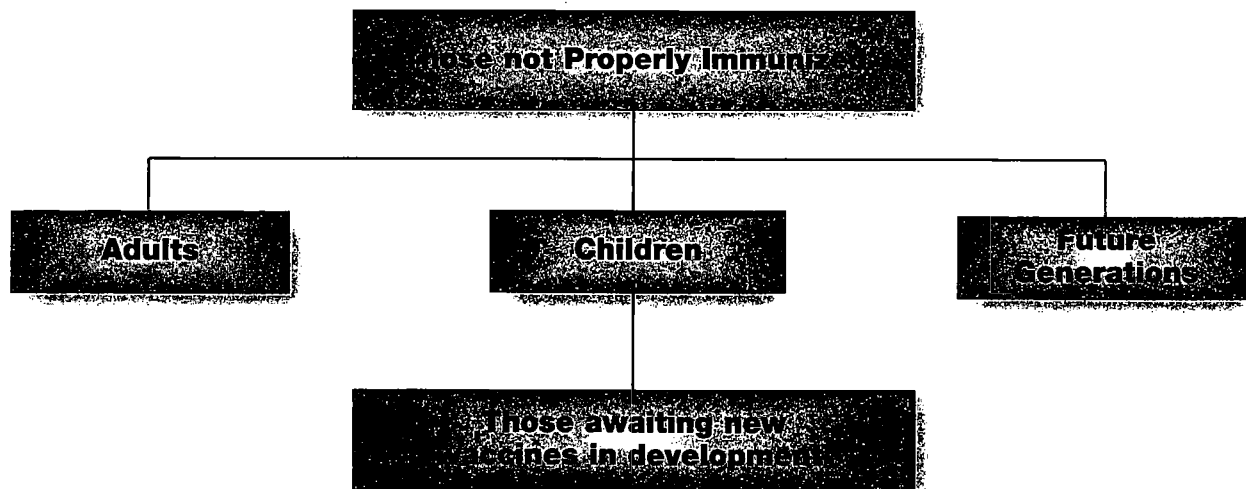
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Our Mission to Promote Immunization

The Foundation's unique mission is to prevent deadly disease by promoting advances in vaccines and immunization. In its work, the Foundation connects caring people with the understanding and resources to save lives.

- Stimulate progress in vaccine science
- Advocate sound policy toward the development and use of vaccines
- Educate the public about vaccines and immunization

Our Beneficiaries and Partners



If it were your last, live each day as if it were your first.

Dr. Albert B. Sabin

Affiliations and Partnerships: Working Together to Prevent Disease

Foundations/Organizations

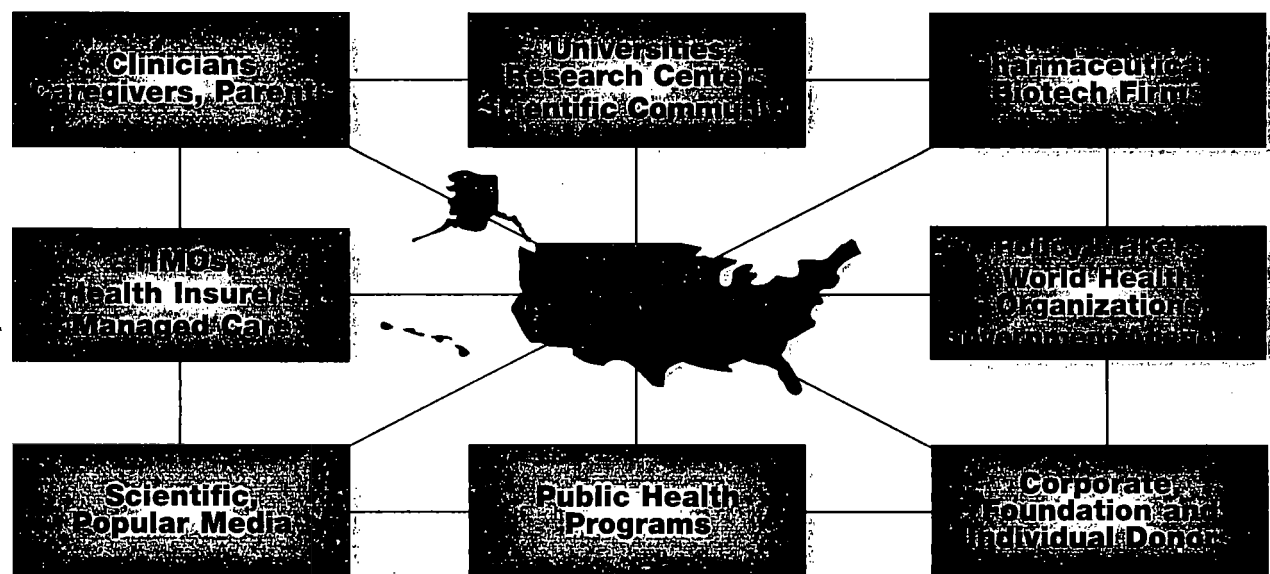
- American Foundation for AIDS Research (AmFAR)
- National Coalition for Adult Immunization
- International AIDS Vaccine Initiative
- Children's Vaccine Initiative
- Pediatric AIDS Foundation
- National Foundation for Infectious Disease
- Infectious Disease Society of America
- The FDA/NIH Council

Government

- Federal Centers for Disease Control
- National Institutes of Health
- National Vaccine Advisory Committee
- National Institute of Allergy and Infectious Disease
- U.S. Department of Health and Human Services
- U.S. Food and Drug Administration
- Elected and Appointed Officials

Academic/Research

- University and Private Medical/Research Centers
- University Health Schools and Public Policy Centers



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The Power of Vaccines to Save Lives

What Is A Vaccine?

A vaccine is a medical preparation given to a person to induce a state of protection against a disease. The typical American receives his/her first vaccine as a newborn to afford protection from a variety of childhood diseases. The needless deaths and illnesses of thousands of U.S. children are prevented through vaccination. Yet, despite the extraordinary preventative power of vaccines, vaccination is often taken for granted. Most people understand little about how vaccines work, how they are made or their remarkable powers of disease prevention.

The concept of vaccines and their practical application for preventing disease was first explored about 200 years ago by the English physician Edward Jenner. Jenner noticed that many milkmaids were afflicted with cowpox, a cow disease that only mildly affects humans. Jenner further observed that these milkmaids seldom, if ever, developed the more severe, and often fatal, smallpox disease. To determine if the two diseases were related, he took a sample from a cowpox lesion on the skin of a milkmaid. He then inoculated this sample into the skin of a young boy. A few weeks later, Jenner again inoculated the boy, this time with infectious material containing the deadly smallpox. As Jenner suspected, the boy did not contract the disease and seemed to be protected. The success of his experiment led Jenner to conclude that vaccination would eventually lead to the eradication of smallpox. His prediction proved to be correct and, in 1977, the global eradication of smallpox was accomplished.

This auspicious beginning led to today's highly-specialized vaccine technology, where scientists from private industry, government and academia work in partnership to develop newer, safer and more effective vaccines to combat infectious diseases worldwide.

Vaccines Currently in Use		
Measles	Polio	Rabies
Yellow fever	Pertussis	Scarlet fever
Neonatal Tetanus	Influenza	Shingles
Chickenpox	Hepatitis A	Smallpox
Cholera	Japanese Encephalitis	
Pneumonia		

Vaccines Currently Under Development		
Measles	Meningococcal Meningitis	Salmonella
Neonatal Virus	Rotavirus	Beriberi
Polio	Schistosomiasis (Bilharzia)	Sickle Cell Anemia
Scarlet fever	Herpes	Smallpox
Shingles	Human Papilloma Virus	

Reported Cases of Vaccine-Preventable Diseases in the United States			
Disease	Maximum Number of Cases and Year	1993 Cases	Change
Polio	15,500 in 1921	0	-15,500
Measles	4,800 in 1941	1,000	-3,800
Whooping Cough	26,000 in 1968	10,000	-16,000
Scarlet Fever	10,000 in 1934	1,000	-9,000
Diphtheria (all types)	11,000 in 1952	1,000	-10,000
Scarlet Fever	10,000 in 1969	1,000	-9,000
Measles	10,000 in 1964-65	1,000	-9,000
Whooping Cough	10,000 in 1921	1,000	-9,000

Data provided by the federal Centers for Disease Control and Prevention

Did You Know?

- ☒ 70,000 American adults die each year - one every 63 seconds - from vaccine-preventable diseases
- ☒ 8 million children worldwide die each year from vaccine-preventable diseases
- ☒ Fewer than half of all American children under the age of two are properly immunized
- ☒ Hepatitis B - which leads to liver cancer - infects more than 300 million people worldwide, despite the existence of a vaccine
- ☒ Through immunization, polio has been eradicated from 145 countries, with global eradication projected for 2000
- ☒ A routine chickenpox vaccination program would save \$400 million a year in U.S. treatment costs
- ☒ No vaccine currently exists for AIDS; 10,000 people a day become infected - one every nine seconds
- ☒ AIDS costs \$10 billion annually to treat; a vaccine would cost \$600 million to develop
- ☒ No vaccine exists for malaria which infects 500 million people each year, killing 2.7 million
- ☒ Flu immunization is responsible for a 54% decrease in morbidity and mortality
- ☒ Prior to a measles vaccine, there were 500,000 diagnosed cases annually
- ☒ Each \$1 invested in vaccines saves \$20 in treatment costs

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Ronald J. Saldarini, Ph.D., *President, Wyeth Lederle Vaccines, Philadelphia, PA*

Martin C. Schwartzberg, *Chairman, Natl. Foundation for Affordable Housing Solutions, Rockville, MD*

Donald S. Shepard, Ph.D., *Research Prof., Inst. of Health Policy, The Heller School, Brandeis University, Waltham, Massachusetts*

Arnold Stang, *Actor/Director, New Canaan, Connecticut*

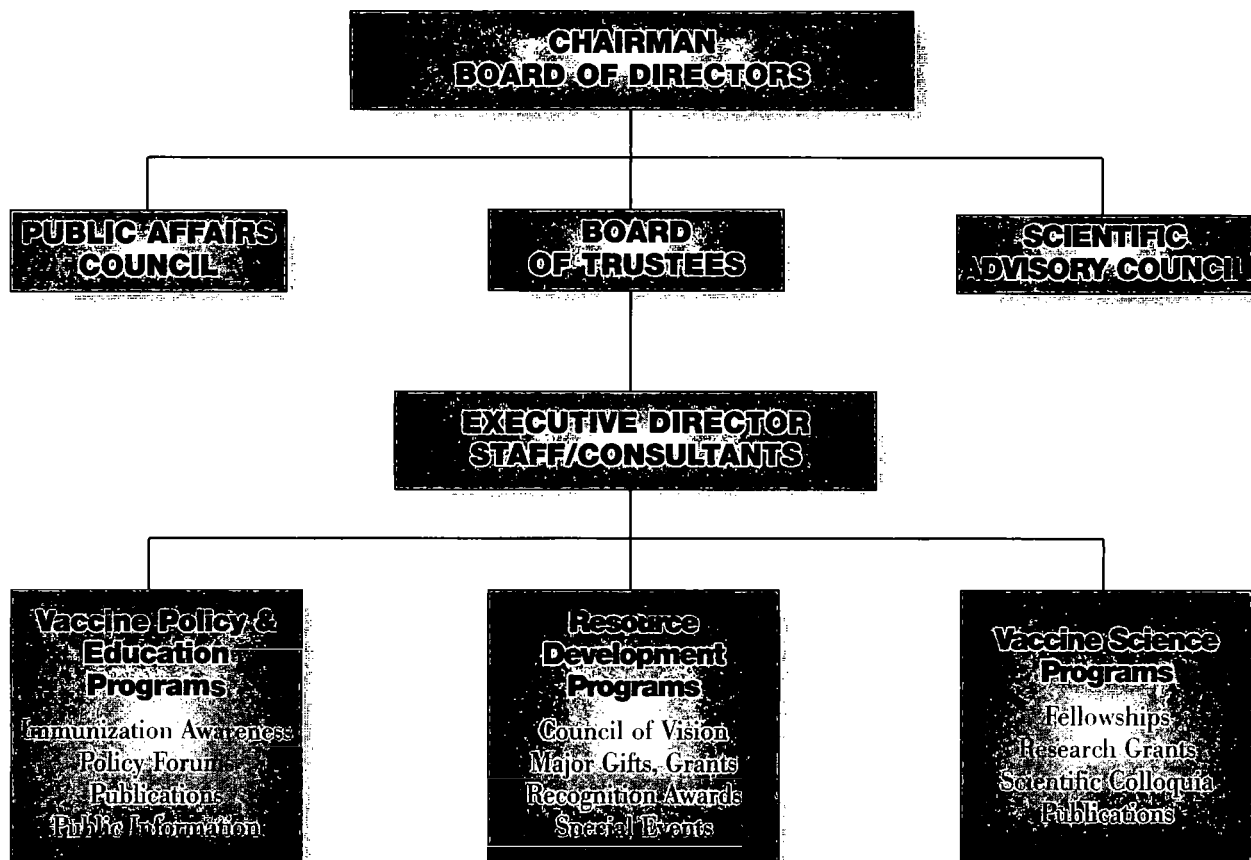
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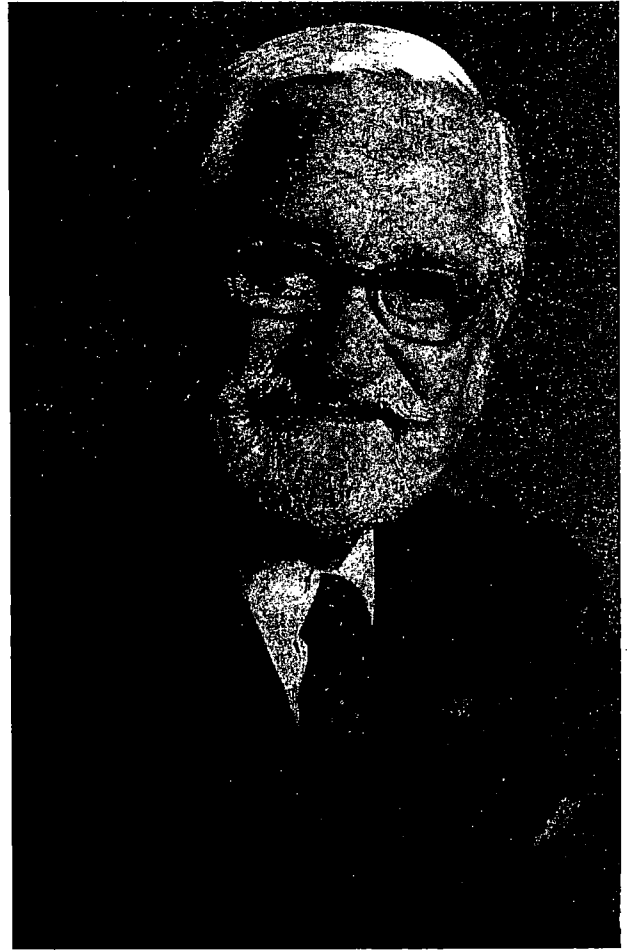
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2 pgs

THE ALBERT B. SABIN LEGACY



THE ALBERT B. SABIN VACCINE FOUNDATION

71 Elm Street
New Canaan, CT 06840
203 972-7907 Telephone
203 966-4763 Fax
info@sabin.org (E-mail)

*"Live every day as if it was your last,
live every day as if you would live
forever. . . ."*

DR. ALBERT B. SABIN, 1906-1993

The Albert B. Sabin Vaccine Foundation
invites you to join your distinguished colleagues

as we present

Dr. Maurice R. Hilleman

with the

Sabin Gold Medal

and

Lifetime Achievement Award

on Tuesday, the thirteenth of May

nineteen hundred and ninety-seven

at six-thirty in the evening

Four Seasons Hotel

Dumbarton Room

Washington, D. C.

Cocktail reception - 6:30 pm

Business attire suggested

Dinner - 8 o'clock

— DR. MAURICE R. HILLEMANN —

Brief Biography

MAURICE R. HILLEMANN is Director, Merck Institute for Therapeutic Research, and Adjunct Professor of Pediatrics, School of Medicine, University of Pennsylvania, Philadelphia, Pa. From 1948-1958, he was Chief, Department of Respiratory Diseases, Walter Reed Army Institute of Research, Washington, D.C. In 1951, he was a Visiting Investigator at the Hospital of the Rockefeller Institute for Medical Research. He has published over 460 original articles in the fields of virology, immunology, epidemiology and infectious diseases. He serves on numerous national and international advisory boards and committees, academic, governmental and private, and has been a member of the Expert Advisory Panel of the World Health Organization, Geneva, since 1952.

Dr. Hilleman received the Lasker Medical Research Award in 1983 and is an elected member of U.S. National Academy of Sciences, the American Academy of Arts and Sciences and the Institute of Medicine of the National Academy of Sciences. Most recently, he was awarded the National Medal of Science by President Reagan. He was appointed by the Secretary of Health and Human Services to the National Vaccine Advisory Committee of the National Vaccine Program.

Dr. Hilleman pioneered the development of numerous live, killed and combined vaccines including measles, mumps, rubella, Marek's Disease, hepatitis A, both plasma-derived and recombinant hepatitis B, adenoviruses, and the commercial evolution of vaccines against meningococci and pneumococci. He has been credited with developing more vaccines than any person and is recognized for having changed the face of the world in providing the means to prevent and control a number of its most important diseases. Dr. Hilleman received his B.S. degree from Montana State University in 1941 and a Ph.D. from the University of Chicago in 1944. He holds several honorary doctorate degrees.



The Albert B. Sabin Foundation
71 Elm Street
New Canaan, Connecticut 06840

Kindly respond before April 18, 1997

Name _____

Spouse/Guest _____

_____ *Yes, I/we will attend*

_____ *No, I/we will not attend*

Choice of Entrée

Poached Salmon _____ *Poillard of Chicken* _____

Tenderloin of Beef _____

1 Mrs. Sandra Therman

Albert B. Sabin Vaccine FOUNDATION

Chairman
H.R. Shepherd

Dedicated to disease prevention

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April 7, 1997

An Open Letter to the Members of the Presidential Advisory Council on HIV and AIDS

**From H.R. Shepherd, Chairman
The Albert B. Sabin Vaccine Foundation**

The Sabin Vaccine Foundation commends the Presidential Advisory Council on HIV and AIDS for its recommendation to set a time goal for an AIDS vaccine, in much the same way that President Kennedy once focused our attention on the conquest of space.

By his visionary call for a vaccine, President Clinton has focused our attention on the only certain way to conquer AIDS. It is one of the strongest statements to date against a plague that kills over 1.5 million people each year.

It is our fundamental belief that a truly national effort - similar in scope to this nation's war on crippling polio - is needed to end the AIDS pandemic. As the Foundation which honors the medical scientist who created the oral polio vaccine, we are committed to another life-saving process.

We not only support your recommendation to create a consortium to expedite development and delivery of an AIDS vaccine -- we have taken a series of important steps toward forming that consortium.

We are drawing on extraordinary examples of selfless cooperation and leadership such as the March of Dimes, the Apollo Space Program and the SEMATECH consortium that revitalized our electronics industry in the 1980s. We have enlisted people who successfully built some of those programs, and will engage leaders of the vaccine industry, government (NIH, FDA, CDC), academia and research, public health policy, and other foundations to help accelerate the process through their active cooperation.

Rather than debate the primacy of any single approach or scientific discipline to produce the life-saving AIDS vaccine, we have adopted the strategy of parallel efforts. We believe that every concept, every science,

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Dedicated to disease prevention

Open Letter to the Members of the
Presidential Advisory Council on HIV and AIDS
page two

every resource that might produce results must be fully, urgently and cooperatively engaged.

It would be a tragedy if millions died while we argued scientific process or failed to explore promising new vaccine candidates. Rather, we must engage leaders who will accept responsibility for results without loyalty to particular methodologies, or to the ownership of ideas.

The Sabin Foundation's AIDS Vaccine Consortium is still in the formative stage, but it is important to share our progress with you here today. We have consulted with leaders of the federal vaccine research effort, and will work with them to devise an effective means for participation. We will also seek out working partnerships and collaborations with organizations such as the International AIDS Vaccine Initiative (IAVI) and others to create a truly cooperative effort to reach our common goal.

We pledge cooperation to all who share in our goal of making AIDS as forgotten as Polio.

Sincerely,

A handwritten signature in black ink, appearing to read "H.R. Shepherd". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

H.R. Shepherd
Chairman

We want to make the word AIDS as forgotten as the word Polio.

Thanks in large part to the oral vaccine developed by Dr. Sabin, polio is a disease we associate with the past.

Unfortunately, AIDS is very much with us today.

The virus that causes this terrible disease infects thousands of people here and around the world every day.

Thanks to advances in therapeutic drugs, many of those people infected by the virus have new hope.

Yet despite these medical advances, no one has ever been cured of AIDS.

A vaccine is the only way to eradicate this scourge to mankind.

At the Albert B. Sabin Vaccine Foundation that's exactly what we're working toward.

*For more information about our efforts to develop and deliver life saving vaccines,
please contact us at the address below.*

ALBERT B. SABIN VACCINE FOUNDATION

71 Elm Street, New Canaan, Connecticut 06840 or e mail: info@sabin.org

MARKETPLACE

AIDS Deaths Drop Significantly for First Time

By OSCAR SURIS

Staff Reporter of THE WALL STREET JOURNAL
The Centers for Disease Control and Prevention in Atlanta has confirmed what many in the war against AIDS were beginning to suspect: Fewer of those infected are dying.

In a report released yesterday, the CDC said 12% fewer Americans with AIDS died

MEDICINE

from the disease in the first half of 1996 than during the same period a year earlier — the first marked decline in the death toll since the epidemic's emergence 15 years ago.

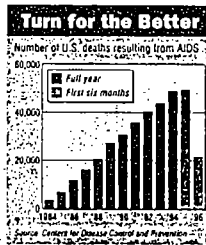
But the CDC's findings, while encouraging, are likely only to raise new questions about the state of the AIDS battle itself. Was the death toll's drop due to the availability last year of promising drugs known as protease inhibitors? And if so, should the direction of AIDS treatment be dramatically altered in response?

Although Health and Human Services Secretary Donna E. Shalala called the drop in AIDS-related deaths "great news for all Americans living with the disease," she also noted the "premature" nature of the drop. Experts full

note the drop in deaths is being driven by a number of factors: the widening practice of mixing several drugs in "cocktail" fashion to fight the disease; the growing availability of AIDS-related health care; and the impact of continuing prevention campaigns. In fact, the Clinton administration said yesterday that another \$202 million in federal funding would be made available for AIDS-related care.

The CDC itself noted protease inhibitors only became available to the public late in the first half of 1996. Of the three protease inhibitors now in use, the first was introduced in December 1993 and the other two in March 1994. What's more, the CDC added, the rate of AIDS-related deaths began flattening well before then — early in 1992 — as more AIDS patients were experimenting with a wide array of previously approved treatments and therapies.

"More likely, we think [the reduction in deaths] is due to a combination of all of the treatment options that have been available to [AIDS patients] up to this point," said Patricia Fleming, an epidemiologist with the CDC. "We can't prescribe a specific percentage of the decline to any of the



bers are not related to any one thing," said Spencer Cox, a director with the Treatment Action Group in New York. "This is actually the result of a lot of different advances, and that tells me that overall we are moving in the right direction."

For others, however, the early data are proof enough of the success protease inhibitors have had when taken in cocktail fashion with other drugs.

who were really close to death," said Jerome Groopman, who treats AIDS patients at Beth Israel Deaconess Medical Center in Boston. "If protease inhibitors had been available for a full year, I think the reduction in deaths could have been 25% to 30%."

More should be known about the effect of protease inhibitors on AIDS patients later this year, when the CDC completes other studies tracking varying therapies. Also significant will be second-half 1996 death-toll statistics; if they, too, are lower, that would suggest leading-edge treatments are having a sustained effect on the country's AIDS population. But until then, on a national basis, the CDC and the broader AIDS community have only early 1996 death statistics from hospitals, hospices and other sources to glean meaning from. In the first half of 1996, according to the CDC, 21,700 AIDS deaths were reported; that compares with 21,700 deaths in the year-earlier period.

Some of that data began reaching the public earlier this year in the form of mortality statistics from different parts of the country. Among the most significant

THE WALL STREET JOURNAL THURSDAY, MARCH 20, 1997

An AIDS Vaccine Can End Epidemic

The good news is that AIDS deaths have dropped substantially ("Medicine: AIDS Deaths Drop Significantly for First Time," Marketplace, Feb. 28). The bad news is that infection rates remain status quo and are even increasing among certain demographic groups.

Experts rightly point out that this decline in deaths does not mean the AIDS epidemic is going away. Indeed, the Centers for Disease Control's Patricia Fleming stresses that as the increasing number of Americans living with the virus continues to grow, so will the demand for resources associated with treating the disease. Therefore, it is imperative that our priority should be to facilitate the measures necessary for the development, broad use and success of an AIDS vaccine to prevent additional infections.

An AIDS vaccine would halt the epidemic and prevent the disease for a fraction of what it costs to care for the afflicted. While death rates will continue to drop with the development of new and more effective therapeutic approaches, only a vaccine will end the epidemic.

H. R. SHEPHERD
Chairman

Albert B. Sabin Vaccine Foundation
New Canaan, Conn.

Still Needed: An AIDS Vaccine

By H.R. SHEPHERD

World AIDS Day this Sunday offered some real cause for celebration: An effective treatment for the dread disease has finally arrived — and not a moment too soon. Last year alone, a million people died from AIDS world-wide. AIDS is now the leading cause of death of 25- to 44-year-olds in the U.S. The nationwide rate of new AIDS infections is 40,000 a year; world-wide, more than three million.

Given these harsh realities, it was natural that American media, scientists and AIDS patients were jubilant this spring when three new drugs that appear to counter AIDS were approved for use. "No one can call AIDS an inevitably fatal disease anymore," exclaimed Peter Piot, director of the United Nations Global Program on AIDS. Clinical trials showed that the new drugs, called protease inhibitors, greatly reduce patients' levels of HIV, the virus that causes AIDS, when combined with AZT and other antiviral drugs.

But the treatment is not a cure. At best, for some patients, it will transform AIDS into a chronic, manageable disease. Like diabetics, the "lucky" AIDS patients who get and respond to the therapy will have to be tested for the rest of their lives. They will have to take a complicated, 15-pill regimen every single day. The cost of the new treatment — \$10,000 to \$16,000 a year — puts it out of reach for most AIDS patients — especially the 90% of AIDS sufferers who live in Third World countries. And AIDS will continue to spread until vaccines are found.

AIDS takes an incalculable toll on humanity. Millions of grieving families must watch loved ones with the disease suffer pain that exceeds even the most potent drugs' ability to suppress it, their bodies slowly, inexorably atrophying. AIDS lays waste to families, too. There were 30,000 AIDS orphans in New York City alone in 1994.

Even the most callous observer must be moved by the economic crisis wrought by AIDS. The lifetime cost of treating an HIV-positive patient in the U.S. is \$119,000. Some estimates place the disease's indirect costs — lost wages and productivity both for patients and care givers — at seven times this sum, or about \$833,000 per patient. Multiplied by the 40,000 new cases a year in the U.S., that works out to more than \$33 billion nationally. AIDS' debilitating effects often force its victims to quit their jobs and lose their medical insurance, the costs of their care and treatment borne by taxpayers and charities.

In some countries, such as Uganda, as many as 15% of adults are infected with HIV. These nations lack the resources to treat their stricken citizens. And the massive death tolls decimate many countries' work forces, setting back economic development and ultimately increasing dependence on foreign aid.

The human suffering and economic crisis caused by AIDS point to a single imperative: We must develop vaccines to prevent, and eventually eradicate, HIV. Vaccines are the most cost-effective medical intervention ever devised. They stop epidemics and prevent diseases for a fraction of the treatment costs.

At the height of the polio epidemic, the disease struck as many as 57,000 Americans a year. But the Salk and Sabin vaccines have eradicated polio in 145 countries, saving more than \$1 billion annually in treatment costs in the U.S. alone — at a cost of as little as \$9 per dose. The World Health Organization plans to wipe out polio world-wide by the turn of the century.

Even more dramatic is the eradication of smallpox. Thanks to international immunization programs, the last case of smallpox was detected in Somalia in 1977. International health officials estimate that

smallpox would have killed five million people a year without immunization. And the complete eradication of smallpox eliminated the need to vaccinate against it, saving the world more than \$20 billion since 1977. Today's youth know smallpox only as a word in history books.

Yet despite the crying need for an AIDS vaccine, funding for vaccine research is meager. Less than 10% of the National Institutes of Health's investment in AIDS research last year went to vaccine research. The NIH itself said this summer that basic research on vaccines is "vastly insufficient." The search for vaccines gets even less funding outside the U.S. Developing countries spent \$10 billion on AIDS last year, but only \$5 million — 1/20th of 1% — went to vaccine research.

The paucity of AIDS vaccine research funds is both vexing and understandable. The most passionate advocates for AIDS research are those directly affected by the epidemic: patients and their families and friends. For them, the top priority is to treat AIDS, to prolong and improve the quality of their lives. It is only natural that they would campaign for research to find AIDS treatments.

But it is immunization, not treatment, that will end the AIDS epidemic. The drive to conquer AIDS requires strong moral, political, scientific and business leadership. We must find innovative ways to make more funds available for research that will eradicate AIDS, not just make it manageable. Each dollar directed to vaccine research will be repaid many times over when immunization reduces, then eliminates, the costs of treating AIDS patients.

Mr. Shepherd, chairman of the Albert B. Sabin Vaccine Foundation of New Canaan, Conn., developed the aerosol inhaler for asthma medication.

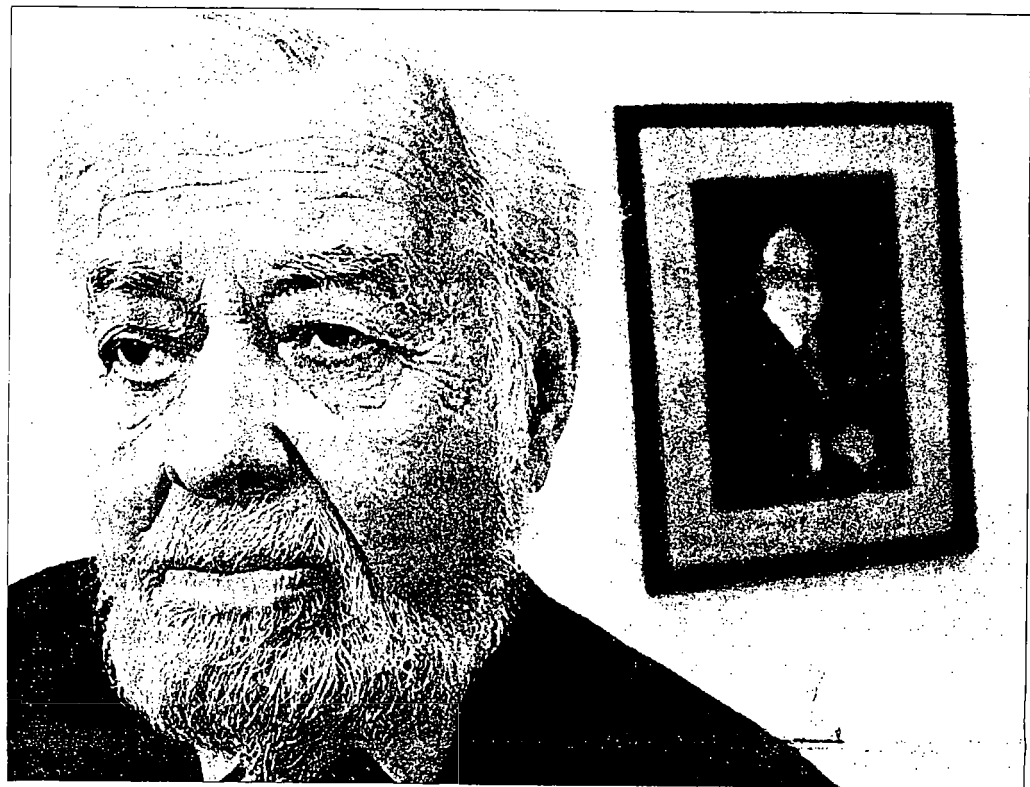
YPO/CEOers who have invested from \$1,000 to \$500,000 with appreciated securities, private foundations, and corporate gifts include: Steve Wiggins, Al Self, Jay Cleveland, Bob Galvin, Norm Alexander, Sir John Templeton, Noel Levine, Ira Gordon, Sol Young, Jim Wilson, Kathryn Thompson, Ronnie Lubner, Ted Nierenberg, Jim Mulholland, John Shepherd, Stan Adelstein, Ben Shepherd, John Hartman, Chuck Peebler, Ed Chapin, H.R. Shepherd and Nick Zwick. Please join us.



H.R. Shepherd continues work of long-time friend and colleague Albert B. Sabin

Sabin Foundation continues its quest to find a vaccine for AIDS

by Joanne Kabak



H.R. Shepherd remembers his long-time friend Albert Sabin, for whom the Sabin Foundation is named. Mr. Shepherd is encouraged that there is a vaccine for AIDS on the horizon.

photo by Mark Conrad

When it comes to a vaccine for AIDS, even the man who discovered the oral polio vaccine, Albert B. Sabin, had doubted it could be done. In the last weeks of his life in 1993, he told his friend and colleague, H.R. Shepherd of New Canaan, "there will never be an AIDS vaccine."

But Mr. Shepherd, a scientist and businessman who caught the fire for believing in vaccines from Dr. Sabin himself, said he replied, "Albert, a scientist as brilliant as you never uses the word never."

Dr. Sabin's response? "You'll straighten it out after I go."

And that is exactly what Mr. Shepherd is doing.

With the blessing of Dr. Sabin's wife Heloisa, Mr. Shepherd established the Albert B. Sabin Vaccine Foundation in 1994, headquartered on Elm Street in New Canaan. A non-profit organization, it is dedicated to increasing the development and use of vaccines by providing grants, holding interdisciplinary seminars, providing fellowships in vaccinology and educating the public.

The foundation is an outgrowth of the visits Mr. Shepherd held every other Saturday in the early 1990s with Dr. Sabin in Washington D.C. Confined to a wheelchair by then, Dr. Sabin "was always dapper, ready to lecture," said Mr.

Shepherd. "He was a genius, not a celebrity."

Inspired, Mr. Shepherd became a man with a mission — to prevent disease and eradicate its existence through vaccination. It's "the most cost effective way to be healthy," he said, especially by stopping AIDS.

It wasn't always his concern. "I'm like everybody else," he said. "I used to think AIDS is someone else's disease." Until

science and business, and how their fortuitous mix can benefit everyday lives, Shepherd said science has consumed him since he was a teenager growing up in Brooklyn in the 1930s.

He dabbled in experiments early on, winning an award when he was only 15 for developing a spray that wiped out the Japanese beetles that were plaguing the New York City subway system.

and educating the public.

He recognizes that it's an uphill battle. Calling vaccination "the least appreciated and least supported method" of disease prevention, he said not enough money is going to it. Only about \$150 million of the government's \$1.5 billion earmarked for AIDS goes to vaccine research, he said.

Nor has the subject taken hold in the public psyche, he said, evidenced by too many people failing to take advantage of vaccines currently in the marketplace, and too few urging the development of new ones.

While Mr. Shepherd, a New Canaan resident for more than 30 years, cares about the health needs of the most distant corners of the world, he is firmly grounded in his local community. Together with his wife Carol Ruth, whom he met at Cornell in the early 1940s, he has raised four children here. Of his two sons, one is an executive with Armstrong and another owns the Lyon Hill Farms in Easton. One of his daughters owns a bed and breakfast in Ocean City, N.J. and the other is a professional photographer.

Mrs. Shepherd, also an accomplished photographer who exhibits in the area, is an active supporter of the League of Women Voters and of Bread & Roses, a group that cares for

people with AIDS.

Mr. Shepherd, a devoted book collector, is a member of the President's Council of the National Academy of Sciences as well as being on several boards of directors. He has served in many local leadership positions, including the Silvermine Guild, the New Canaan Inn, a residence for the elderly, and the New Canaan Library.

But while Mr. Shepherd, who is called "Shep" by most, is proud of his family and their many accomplishments, he prefers to spend less time telling their story and more on the efforts of his mission.

As he pursues an AIDS vaccine, he shows much of the same mettle as Dr. Sabin, whom he calls "a pit bull who kept on going despite lack of support." While he initially contacted Dr. Sabin to see whether they might form a partnership, blending Armstrong's expertise in inhalants with Sabin's efforts to develop a measles vaccine to be taken through the nostrils, that commercial relationship never materialized.

Instead, inspired by Dr. Sabin to fight for new vaccines and better use of established ones, Mr. Shepherd sees a long road ahead for improving the world's health.

"Whatever we find to prevent AIDS will help us to prevent cancer, too," he said.

"Whatever we find to prevent AIDS will help us to prevent cancer, too."

-H.R. Shepherd

he started to study the topic after his retirement, that is.

With the physical suffering of AIDS and its potential for wiping out whole economies in areas where it is widespread, "I became horrified by the magnitude of it," Mr. Shepherd said.

Thanks to recent advances in research, Mr. Shepherd believes an AIDS vaccine could be ready within five years. In fact, his foundation is already at work on developing a consortium of leaders in science, business and government to define the next steps — how a vaccine for AIDS will be administered, who will get it and who will pay for it.

No stranger to the ways of

Later, he became a pioneer in the development of aerosol medications, discovering the metered-dose aerosol inhalant used by asthmatics. Holding a chemistry degree from Cornell, he served in the army and worked as a chemist at Bridgeport Brass. He founded his own business in 1955, known as Aerosol Techniques Inc. in Bridgeport before it became Armstrong Pharmaceuticals.

Now in his 70's, Mr. Shepherd serves as a special consultant to Armstrong, which he sold to Medeva PLC, a British pharmaceutical company in 1993. But rather than spend his retirement days at leisure, he is turning his considerable energy on influencing the government

THE WHITE HOUSE
WASHINGTON

February 21, 1997

Mr. H. R. Shepherd
Chairman
Albert B. Sabin Vaccine
Foundation, Inc.
Post Office Box 848
New Canaan, Connecticut 06840

Dear Mr. Shepherd:

Thank you for your kind words about my State of the Union speech.

I agree that in our battle against HIV and AIDS, our highest priority must be the search for a vaccine and cure. I'm grateful for all the hard work you are performing in this vital effort.

I also share your enthusiasm about our first-ever National AIDS Strategy. I believe it lays out both a vital set of long-term goals to put an end to this epidemic, and a series of short-term steps we must take to move us in the right direction.

There is a great deal of work still to do, and I appreciate your continued dedication.

Sincerely,

Bill Clinton



THE VICE PRESIDENT
WASHINGTON

February 3, 1997

Mr. Roger J. Sullivan
Albert B. Sabin Vaccine Foundation, Inc.
P. O. Box 848
New Canaan, Connecticut 06840-0848

Dear Mr. Sullivan:

Thank you for contacting me and expressing your views regarding this Administration's efforts to combat Acquired Immune Deficiency Syndrome (AIDS). I welcome this opportunity to respond.

Our government, indeed our entire society must be committed fully to the eradication of this deadly disease. We must attack the AIDS crisis head-on by taking action to control the spread of the Human Immunodeficiency Virus (HIV), continuing a program of extensive research, and finding ways additional ways to treat those who are already victims. I am encouraged, but not satisfied, with the progress we have made over the past four years in our efforts to combat this disease.

AIDS is the leading cause of death among all Americans aged 25 to 44, and the number of Americans becoming infected with HIV continues to increase. This makes the need for a cure for AIDS even more imperative.

This Administration is pursuing a comprehensive strategy to properly deal with the AIDS epidemic. First, we actively have supported increased funding for AIDS-specific and general biomedical research. As you may know, we have presided over a 40 percent increase in NIH-supported AIDS research, while greatly strengthening the Office of AIDS Research at NIH.

Second, the President and I worked hard to ensure the passage of the Ryan White CARE Act. This significant legislation was reauthorized by overwhelming majorities in the Congress and signed into law by the President. This bill provides emergency financial assistance to the cities hardest hit by the AIDS epidemic, funding to states and communities for the development of hospices and other care services, and money to help coordinate efforts between researchers and health care providers looking for a cure to this dreaded disease.

Various federal agencies also are working to combat the AIDS epidemic. For instance, the Food and Drug Administration (FDA) has accelerated its AIDS drug approval process, and the Department of Health and Human Services (HHS) has designed a program that links health care providers to the latest HIV/AIDS information.

February 3, 1997

Page 2

Additionally, the President has created the Office of National AIDS Policy at the White House and the Presidential Advisory Council on HIV/AIDS. Also, as a result of last year's White House Conference on HIV and AIDS, we recently established the Forum for Collaborative HIV Research. Through efforts like this new forum, and the cooperative efforts of government and private sector researchers, we will continue the fight for better and more affordable prevention strategies and vaccines.

The President and I will not relax our efforts in fighting AIDS. We truly are committed to alleviating the suffering of those afflicted with AIDS, preventing the spread of the disease, and finding a cure. I welcome your support as we work to defeat this terrible illness.

Sincerely,

A handwritten signature in black ink, appearing to read "Al Gore". The signature is fluid and cursive, with the first name "Al" and last name "Gore" clearly distinguishable.

Al Gore

AG/amm

Bold Stroke for an AIDS Vaccine

by H.R. Shepherd

The news that the AIDS death rate in the U.S. declined for the first time ever last year raised hopes that we may have rounded a critical corner in our battle against the viral plague. But while the news was indeed welcome, the reduced sense of urgency it created poses grave dangers. Yes, the death toll declined in the U.S., but AIDS continues to claim 1.5 million lives annually worldwide¹. And 3 million people become newly infected with AIDS each year. The plague continues to expand.

The unabated spread of AIDS points to a single imperative: we must develop vaccines that will serve as the Bold Stroke to prevent and eradicate this dread disease.

American political leaders have awakened to this truth. President Clinton noted in his 1997 State of the Union address, "that every year we move up the discovery of an AIDS vaccine, we'll save millions of lives around the world." He called for "new resources" to enable the National Institutes of Health (NIH) to "become the most powerful discovery engine for an AIDS vaccine." Last January, he appointed eminent scientist David Baltimore, a Nobel Laureate, to lead a national effort to develop AIDS vaccines. These are positive steps. But to accelerate the development of AIDS vaccines will require a more broad-based effort, one that brings together the best and brightest minds from government, industry and academic research laboratories in common pursuit of a vaccine.

We cannot look to less developed countries that are the hardest hit by AIDS, and most desperate for a vaccine, to discover one. Developing nations spent \$10 billion on AIDS in 1995 but only \$5 million of that went to vaccine research.² An intensified search for an AIDS vaccine must be led by the United States. The U.S. is the world leader in medical innovation. American biopharmaceutical companies accounted for nearly two-thirds of all new drugs introduced worldwide from 1940 to 1988³. It was the synergistic relationship between U.S. academic research centers, the National Foundation for Infantile Paralysis (now called the March of Dimes), and drug manufacturers that produced the vaccines that eradicated polio.

Another industry in which the U.S. is the world leader -- semiconductor development and production -- provides a model for the AIDS vaccine research effort we must immediately undertake. The U.S. invented semiconductors, the microchips that are the "brains" of computers. But by the mid-1980s, foreign competitors had wrested

¹ Brown, David, "U.S. Deaths from AIDS Fall Sharply," *The Washington Post*, February 28, 1997, pp. A1-A9.

² Freundlich, Naomi, et al, "AIDS: Hope is Where the Money is," *Business Week*, July 22, 1996, pp. 34-35.

³ Paris, Susan E., "Will Washington Hand Japan Our Biotechnology Industry?," *North American Precipitate*, May 1994.

leadership of this cutting-edge industry from the U.S. American business, military and political leaders grew concerned that dependence on foreign microchip suppliers would weaken U.S. economic competitiveness and threaten our national defense. They determined to join forces to conduct research aimed at regaining and protecting U.S. leadership in semiconductor manufacturing technology. In 1987, they formed a non-profit, industry-driven research and development consortium called SEMATECH.⁴

The SEMATECH example is instructive because it has been enormously effective in achieving its goals. SEMATECH brings 10 semiconductor manufacturers -- spirited competitors -- together with academic and government researchers to develop advanced manufacturing processes. From 1988 through 1995, the member companies and the Federal government shared the cost of SEMATECH. Member companies now shoulder all of the costs. The cooperative approach of the consortium provides for more efficient use of research and development funds, better coordination between industry, academic and government laboratories, and more widespread use of state-of-the-art manufacturing technology by American industry.⁵

The results spawned by SEMATECH are readily apparent. Today the American semiconductor industry is again the world leader. Consortium members such as Hewlett-Packard, Intel, IBM and Motorola set the global standards in their respective markets. The national security payoff was demonstrated by U.S. forces' technological superiority in the Persian Gulf War.

If we are to eradicate AIDS, we must have the type of leadership and cooperation that enabled SEMATECH to produce such extraordinary results. It is urgent that everyone pursuing development of an AIDS vaccine work together, including government laboratories such as NIH, university and independent research institutions, and pharmaceutical and biotechnology companies. A united effort will ensure the most efficient use of research dollars by avoiding duplicative efforts. It will allow the foremost scientific talent to collaborate to find the keys to prevent the spread of the incredibly complex AIDS virus.

Private sector drug discovery companies must be given incentives to invest more resources in AIDS vaccine research, a pursuit fraught with risks. AIDS is so different from other diseases that scientists cannot use tried-and-true methods of vaccine development. Instead, they must grope in darkness to solve the puzzle. Numerous prospective vaccines already have been tried and failed. Despite the desperate need for a vaccine, companies are understandably reluctant to commit much money to a project with so little prospect of success. Neither can government shoulder this burden alone. Only

⁴ "Facts About SEMATECH," www.sematech.org/member/general/about/about.html

⁵ "Facts About SEMATECH"

recently did Federal spending on vaccine research climb above 10%⁶ of the \$1.5 billion spent on AIDS.⁷

Pharmaceutical and biotechnology company involvement is essential for more than financial reasons. They are the engines of drug discovery. Over 90% of all drug patents come from the private sector.⁸

Additionally, we must have strong political leadership to build public support for an unprecedented effort to develop a vaccine. President Clinton must continue to speak out, to explain to the American people how the global spread of AIDS threatens us, and how all of us, not just those most at-risk, will benefit when AIDS can be prevented. Other political leaders must break their silence on this subject and unite behind this effort. They should recall our nation's success in the 1960s when we concentrated our resources to land on the moon.

Concurrent with the vaccine discovery effort must be development of a sound plan for distribution of an AIDS vaccine. This cannot wait until a vaccine is discovered. Ninety percent of the people with AIDS live in Third World countries.⁹ In other words, those who need an AIDS vaccine the most are those least able to pay for it. The World Bank already has begun a commendable effort to induce countries to commit in advance to buy a vaccine.¹⁰ Numerous philanthropic foundations now grant millions of dollars to AIDS research and treatment. They should pledge to purchase an AIDS vaccine and provide it to people throughout the world who can't afford it. Such financial commitments will encourage pharmaceutical and biotech companies to invest more in AIDS vaccine research. And, planning the vaccine distribution now will ensure that it reaches people rapidly.

Vaccines are the most effective and least expensive medical interventions ever devised. They stop epidemics and prevent diseases; polio and smallpox are notable examples. They obviate treatment costs. A Rockefeller Foundation scientific panel estimated it will cost \$600 million to develop an AIDS vaccine.¹¹ With AIDS killing 1

⁶ Tanouye, Elyse, "A Few AIDS Vaccines Are Ready for Testing; Now, Who Goes First?," *The Wall Street Journal*, January 17, 1997, pp. A1-A7.

⁷ Clinton, William J., "State of the Union Address," February 4, 1997.

⁸ Valentine, Tim, and Lewis, Tom, "Health Care Reform and Medical Technologies," Subcommittee on Technology, Environment and Aviation, U.S. House of Representatives, May 5, 1994, pp. 1-2.

⁹ Shepherd, H.R., "Still Needed: An AIDS Vaccine," *The Wall Street Journal*, December 3, 1996.

¹⁰ Tanouye, p. A7

¹¹ International Ad Hoc Scientific Committee, "HIV Vaccines -- Accelerating the Development of Preventive HIV Vaccines for the World; Summary Report and Recommendations," The Rockefeller Foundation and Foundation Mrieux, February 1995, pp. 2-3.

million people¹² and costing the global economy over \$100 billion a year¹³, it is abundantly clear that creating an AIDS vaccine should be one of the world's highest priorities.

The SEMATECH model shows how academia, government and industry can work together to produce great scientific and commercial achievements. The Manhattan Project and moon landing proved it in the past. Now we must put aside our differences and egos and unite behind a cooperative effort to develop a vaccine that will end the plague of AIDS.

H.R. Shepherd is Chairman of the Albert B. Sabin Vaccine Foundation in New Canaan, Conn. A scientist and retired Chief Executive Officer of Armstrong Pharmaceuticals, he developed the aerosol inhaler for asthma medication.

¹² Cowley, Geoffrey, "New AIDS Optimism," *Newsweek*, July 22, 1996, p. 68

¹³ Oldham, Jennifer, "The Economic Cost of AIDS," *Los Angeles Times*, October 13, 1995, reported, "By 2000, the total cost to the global economy of the AIDS pandemic could reach \$514 billion. With less than 3 years before 2000, the cost must well surpass \$100 billion.

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3738

Date Rcvd: 05-09-97

From: RON McEINIS, JR
NCIH

Staff Action:

Reviewed By Sandy: ☒ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

no can do moving day -

To Support Staff: _____

Date of Response: _____

6 May 1997

Ms. Sandra Thurman
Office of National AIDS Policy
750 15th Street, NW
Suite 600
Washington, DC 20503

Dear Ms. Thurman:

It is with great pleasure that we invite you to participate in our 24th Annual Conference, *Building Strategic Alliances for Global Health*, from June 12-14, 1997, at the Hyatt Regency Crystal City, Arlington, Virginia. The conference has generated a good deal of interest and we believe your presence will significantly enhance the knowledge and understanding our members and guests need to confront global health challenges.

While the main focus of the conference is on global health issues, Friday, June 13, is when all HIV/AIDS-related workshops, seminars, and activities are to take place. This includes a display of the NAMES Project international quilt, and a reception to be held at 6:30 p.m. to welcome our international visitors from Asia and Africa. *We would also like the reception to be an opportunity for you to meet the US-based international AIDS community.*

Other HIV/AIDS-related panels and discussions will be happening on Friday morning and Friday afternoon, including a plenary address on "Business in a World of AIDS" (given by Dr. Peter Piot of UNAIDS, Health and Human Services Secretary Donna Shalala, and Levi's Strauss' Co. Director Richard Woo), and HIV/AIDS-related panel presentations from representatives of USAID, AIDSCAP, HHS, CDC, the International HIV/AIDS Alliance, and NAPWA - all of whom should be present at the reception.

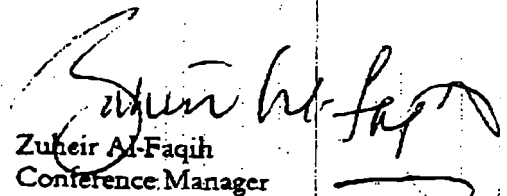
Our office enjoyed a long collaborative relationship with Patricia Fleming in keeping her connected to the international community of organizations working in global HIV/AIDS-related issues, and we look forward to maintaining our strong ties with your office. The NGIH annual conference provides a unique opportunity for the Office of National AIDS Policy to make contact with key figures working to promote the US response to the global AIDS epidemic.

We hope you will be able to attend our conference, and we look forward to hosting a reception to introduce you to the international AIDS community.

If you have any questions, please do not hesitate to contact us.

Sincerely,


Ron MacInnis, Jr.
AIDS Program Officer


Zuheir Al-Faqih
Conference Manager

Encl.



NON-PROFIT 501(c)3

Hyatt Regency
703-418-1234

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3756

Date Rcvd: 05-14-97

From: Ron Mac INKUS JR.
Nat'l Council for International Health

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____



NATIONAL COUNCIL FOR INTERNATIONAL HEALTH

1701 K STREET, N.W. SUITE 600, WASHINGTON, DC 20006, (202) 833-5900, FAX: (202) 833-0075

6 May 1997

Ms. Sandra Thurman
Office of National AIDS Policy
750 15th Street, NW
Suite 600
Washington, DC 20503

Dear Ms. Thurman:

It is with great pleasure that we invite you to participate in our 24th Annual Conference, *Building Strategic Alliances for Global Health*, from June 12-14, 1997, at the Hyatt Regency Crystal City, Arlington, Virginia. The conference has generated a good deal of interest and we believe your presence will significantly enhance the knowledge and understanding our members and guests need to confront global health challenges.

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Our office enjoyed a long collaborative relationship with Patricia Fleming in keeping her connected to the international community of organizations working in global HIV/AIDS-related issues, and we look forward to maintaining our strong ties with your office. The NCIH annual conference provides a unique opportunity for the Office of National AIDS Policy to make contact with key figures working to promote the US response to the global AIDS epidemic.

We hope you will be able to attend our conference, and we look forward to hosting a reception to introduce you to the international AIDS community.

If you have any questions, please do not hesitate to contact us.

Sincerely,

Ron MacInnis, Jr.
AIDS Program Officer

Zuheir Al-Faqih
Conference Manager

Encl.



NON-PROFIT 501(c)3

**Office of
National AIDS Policy**

Correspondence Routing Slip

Tracking Number: G3763

Date Rcvd: 05-19-97

From: Anne Hughes

Association of Nurses in AIDS Care (ANAC)

Staff Action:

Reviewed By Sandy: _____ **Reviewed By:** _____

Assigned To: _____

RCVD: _____ **DONE:** _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____

ANAC

ASSOCIATION OF
NURSES IN AIDS CARE

May 9, 1997

Ms. Sandra Thurman
Director
National Office of AIDS Policy
808 - 17th St NW, 8th floor
Washington DC 20006

Dear Ms. Thurman:

As President of the Association of Nurses in AIDS Care (ANAC), I congratulate you on your appointment as Director of the National Office of AIDS Policy. We are delighted that a person with your expertise in HIV/AIDS and your well earned reputation in the HIV/AIDS community is advising the President on HIV/AIDS issues and directing the Administration's Office of AIDS Policy.

ANAC pledges its support to assist you in any way we can that will advance the care and treatment of people living with HIV, as well as the prevention of further HIV infection. We are willing to provide you with nursing experts from our national database who address the range of clinical, research and policy issues related to HIV/AIDS care and prevention. In addition, I am putting you on the mailing list to receive our bimonthly peer reviewed journal the **Journal of the Association of Nurses in AIDS Care** (which is edited by your former colleague Richard Sowell) and our bimonthly newsletter **ANACdots**.

ANAC is a national organization with a membership of almost 3,000 members and a network of 50 local chapters. ANAC maintains collegial relationships with other HIV/AIDS nursing specialty organizations around the globe. Annually ANAC hosts an educational conference which provides an opportunity for 800 nurses to meet their colleagues whether researchers, educators, clinicians or policy makers. This year's 10th annual conference is scheduled to occur in Miami from November 6th through the 9th. Please accept this heartfelt invitation to be part of our meeting.

Please do not hesitate to contact me if you have questions or a need for our assistance. I can be reached at my work number at San Francisco General Hospital 415-206-5542. Our Board meetings are held in Washington, DC, and our next one is the weekend of July 11th. I would like very much to meet with you when I am in town for that meeting, if your schedule permits. If, in the meantime, you would like to meet with representatives of ANAC, the chair of our Government Relations Committee, Helen Schietinger, and a Board member, Kevin Mallinson, live in Washington DC and would be happy to meet with you. Their work phone numbers are 202-722-4333 and 410-328-1215, respectively.

Again, ANAC welcomes to your new post.

Sincerely,



Anne Hughes, MN, RN, FNP, ACRN
President, 1996-97

cc: Inge Corless, Ph.D., RN, FAAN, President -elect

Declined 6/9/97

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3730

Date Rcvd: 05-07-97

From: Makine F. Singer
Carnegie Institution

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____

n:\corresli

OFFICE OF THE PRESIDENT

May 1, 1997

Ms. Sandy Thurman
Director
Office of AIDS Policy
Suite 80
808 17th Street, NW
Washington, DC 20006

Dedham

Dear Ms. Thurman:

It is a pleasure to invite you and a guest to join me for a scientific lecture the evening of Tuesday, May 20, to be followed by a dinner in honor of our speaker.

Dr. William E. Paul of NIH's Office of AIDS Research will deliver a lecture entitled "HIV and AIDS: Science Confronts An Epidemic." It will be a comprehensive presentation covering both the world-wide implications of the disease and the most promising developments in drug and vaccine development.

The evening's events will take place at the Carnegie Institution of Washington's historic headquarters building in downtown Washington, D.C. (1530 P Street, NW). The lecture will start promptly at 6:30 pm. The dinner will conclude around 9:30 pm.

Please R.S.V.P. by returning the enclosed form by FAX or mail, or by calling Ms. Margaret Charles in Carnegie's Office of External Affairs at (202) 332-0544 no later than Wednesday, May 14.

I hope you will be able to join us for this stimulating lecture on May 20.

Sincerely,

Maxine F. Singer

Maxine F. Singer

Enclosure

1530 P STREET, NORTHWEST • WASHINGTON, D.C. 20005-1910 • 202-387-6400 • FAX 202-387-8092

Department of Plant Biology
Stanford, California

Department of Embryology
Baltimore, Maryland

Department of Terrestrial Magnetism
Washington, D.C.

Geophysical Laboratory
Washington, D.C.

The Observatories
Pasadena, California, and Las Campanas, Chile

CAPITAL SCIENCE LECTURES

Sponsored by the

Carnegie Institution of Washington

FACSIMILE RESPONSE FORM

FAX: (202) 232-3140

Tuesday, May 20, 1997, 6:30 pm

Dr. William E. Paul of NIH's Office of AIDS Research.

Lecture Title: "HIV and AIDS: Science Confronts An Epidemic."

- [] Will attend the lecture and dinner
- [] Will not attend the lecture or dinner
- [] Will attend the lecture only
- [] Will bring _____ as a guest to dinner
(Guest's Name)

(Name)

(Title)

(Affiliation)

(Address)

(City)

(State/Zip)

(Daytime Telephone)

(Fax #)

Please call Ms. Margaret Charles at (202) 332-0544, if you have any questions or wish further details.

Please Return This Form by May 14 Deadline....

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3792

Date Rcvd: 05-30-97

From: Chris Collins

AIDS Vaccine Advocacy Coalition

Staff Action:

Reviewed By Sandy:  Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

Schedule

Who will be meeting?

Will you be at there @ any time?

To Support Staff: _____

Date of Response: _____

n:\corresli

Chris Collins
AIDS Vaccine Advocacy Coalition
437 Andover St.
San Francisco, CA 94110
415/597-4969 (wk) 415/648-9775 (hm)
collins@psg.ucsf.edu

Sandra Thurman
Director
Office of National AIDS Policy
The White House
Washington, D.C.

Dear Ms. Thurman:

It was a pleasure to meet you earlier this week at the AIDS Policy Center conference.

I am writing to follow up on our brief conversation about HIV vaccine research. I am a member of the AIDS Vaccine Advocacy Coalition (AVAC), a community based group working to focus attention on the urgent need for a vaccine, and to identify key actions government, the private sector, and affected communities can take to accelerate research in this area.

To meet the President's laudable goal of achieving an HIV vaccine in a decade, we must find ways to marshal the research expertise in the private sector. The AVAC report, *Industry Investment in HIV Vaccine Research*, which I gave you Monday, details the results of our confidential interviews with staff at pharmaceutical and biotech companies. Industry representatives spoke with us about major impediments to HIV vaccine research, and actions government can take to remove roadblocks to increase industry investment.

~~We would be very interested in talking with you about the findings in our report, and in discussing actions the administration could initiate to improve industry involvement.~~

All of us at AVAC are excited about the President's statement on HIV vaccines. We hope to work with you to translate that Presidential declaration into real, specific action which can speed research. A list of AVAC members is enclosed.

I hope to speak with you in the near future.

Sincerely,



Chris Collins
AVAC

5/22/97

AIDS Vaccine Advocacy Coalition

Sam Avrett

1400 I. Street, NW #1220
Washington, DC 20005
202 / 842-2750 wk
202 / 265-7034 hm
202 / 408-1818 fax
72530.3637@compuserve.com

Chris Collins

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415 / 648-9775 hm
415 / 647-5585 fax-hm
415 / 597-9213 fax-wk
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Garance R. Franke-Ruta

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franke@fas.harvard.edu

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Bill Snow

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Steve Wakefield

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