

FOIA MARKER

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Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member:

Subseries:

OA/ID Number: 21062

FolderID:

Folder Title:

Random Letters [4]

Stack:

S

Row:

67

Section:

1

Shelf:

4

Position:

2

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. letter	Sandra Thurman to Individual living with HIV (Personal) [partial] (1 page)	07/14/1999	b(6)
001b. letter	Individual living with HIV to Sandra Thurman (Personal) [partial] (2 pages)	06/14/1999	b(6)
002. note	Jacqueline Signori to Sandra Thurman re: AIDS victim (Personal) [partial] [One page closed in whole] (2 pages)	00/00/0000	b(6)
003. resume	re: Brent Minor [Personally Identifiable Information] [partial] (1 page)	00/00/0000	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21062

FOLDER TITLE:

Random Letters [4]

2018-0764-F

jm2228

RESTRICTION CODES

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

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
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C. Closed in accordance with restrictions contained in donor's deed of gift.

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

RR. Document will be reviewed upon request.

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

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July 7, 1999

The Honorable Juanita Millender-McDonald
Member, Congress of the United States
419 Cannon Building
Washington, DC 20515-0537

Dear Representative Millender-McDonald:

Thank you for your letter dated June 15, 1999 and especially for the tee shirt you sent. I am very excited to hear about your successes in raising HIV/AIDS awareness through the Minority Women and Children's AIDS Walk. What a great event!

As you know, this past October, President Clinton set aside an unprecedented \$156 million to improve the nation's effectiveness in preventing and treating HIV/AIDS in the African-American, Hispanic, and other minority communities. This initiative illustrates how the spread of HIV/AIDS in minorities, especially African American women, has been of great concern to this office and Administration.

I would like to take this opportunity to thank you for your continued efforts to raise awareness about HIV/AIDS in minority communities. Your work not only helps minority women and children affected by HIV/AIDS, but motivates your peers in Congress. Fighting on the front lines of the AIDS epidemic has not been easy and it continues to be a difficult journey. It is because of people like yourself -- who are willing to address the tough issues and give voice to the concerns of the community -- that we will move forward until we reach the end of this pandemic.

Thank you again for your contributions.

Sincerely,

Sandra L. Thurman
Director
White House Office of National AIDS Policy

July 6, 1999

LaTonya Thompson
4890 Bedford Road
Detroit, Michigan 48224

Dear Ms. Thompson:

Thank you for taking the time to share with Mrs. Clinton your personal concerns about the devastating impact of HIV/AIDS in your community. On behalf of the First Lady, I would like to respond to your email.

The Office of National AIDS Policy was established by President Clinton in 1993, and is designed lead the Administration in HIV/AIDS policy development. We have been working to coordinate the many branches of the federal government in order to advance research, services, and prevention of HIV/AIDS. President Clinton and Vice President Gore have worked hard to invigorate the response to HIV and AIDS. They have provided a new national leadership, substantially greater resources, and a closer working relationship with affected communities than any prior administration.

Thank you again for your letter which gives a voice to the very important issues our society must confront with regards to HIV/AIDS. I wish you the very best.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

THE WHITE HOUSE
WASHINGTON

4 Jan 99
DATE

MEMORANDUM

FOR:

ONAP

FROM:

SUE J. SMITH *SJS*
DIRECTOR, AGENCY LIAISON

SUBJECT:

REFERRAL OF CASEWORK

I am forwarding the attached letter to your office for appropriate action. Please send us a copy of your written response or your telephone report along with the writer's original correspondence and envelope to the following address:

Ms. Sue J. Smith
Director, Agency Liaison
Room 6, OEOB
The White House
Washington, D.C. 20502

If you have any questions, call my office at 202/456-7486.

Thank you for your help.

Agony
David

6WAP

From: LaTonya Thompson <Deibus @ AOL.com> on 04/22/99 05:15 PM GMT
To: First_Lady @ gateway
cc:
Subject: Please to start helping more so people like me at the bottom

[Connection Information]

CLIENT: 205.188.197.186 [205.188.197.186]
BROWSER: Mozilla/2.0 (compatible; MSIE 3.0; AOL 3.0; Windows 3.1)
URL: http://www.whitehouse.gov/WH/Mail/html/Mail_First_Lady.html

[Sender Information]

PERSONAL-NAME: LaTonya Thompson
EMAIL-ADDRESS: Deibus@AOL.com
ORGANIZATION: n/a
RELATIONSHIP: self
STREET-ADDRESS: 4890 Bedford
CITY: Det.
STATE-PROVINCE: Mich.
ZIP-CODE: 48224
COUNTRY: county: Wayne ~~Wayne~~ USA

[Message Information]

PURPOSE: Offer neutral commentary, advice, or a suggestion
TOPIC: Human Rights
AFFILIATION: Private Citizen
SUBJECT: Please to start helping more so people like me at the bottom not by choice but by roots can get up in do some things for are selfs.

[Message]

Dear Ms.Fisrt Lady
Hello,Hi

My name is L.Thompson I live here in Detroit,MI. Let me tell you a little about mysel I'm 27yrs.old I love life,I love children and I love music I went to highscool and I took some college classes but I never attended Havrard,Yale or any other high standard colleges other than community colleges do I have a voice.To day I felt the need to write you I look at your husband and you on T.V. and in the news papers and I see Two People who have to be all that thay can be and nothing less.And so many people have told me in life that when you are sick of something go straight to the top,be heard know that you have a voice,a choice and know and believe in what you are saying.So Today April 22.1999 Ms. Fisrt Lady and Mr.President I'm going pass the people,pass the Mayor and pass the Govenor I'm going straight to the top,now I need to ask you to hear me loud I have a voice and I will take it a step higher now after this if you don't or can't do just any good one thing to help me I'll take it to the ALMIGHTY-KING OF KINGS. I,m not HIV positive or AIDS positive,but I see alot of WARRING going on 
my life is young and dead I'm like a pretty flower that has been stumped out and now I have only my roots to grow so I

have to start all over again .WAR HERE-WAR THERE I SEE
MORNING-NOON AND NIGHT ON T.V. ON THE FRONT PAGES WAR-WAR-WAR
BUT THERE'S ONE WAR THAT NEEDS TO BE ATTENDED TO ON THE FRONT
PAGES EVERY DAY AND THAT'S THE WAR ON AIDS UNTIL THE WAR IS
OVER OR AT LESS HAS BEEN BEATEN AND THAT'S THE WAR ON AIDS
, LET US THE PEOPLE KNOW LOUD EVERY DAY THAT YOU ARE HELPING
THE FIGHT ON THE SILENT KILLER AIDS. PLEASE MR. AND MS.
PRESIDENT HELP YOUR HOMELESS-STARVING-DOMESTIC-VIOLATED
FAMILYS AND SICK, DEPRESSED, OPPRESSED AND LOOKING FOR A BETTER
DAY PEOPLE HERE IN DETOIT AND IN AMERICA HERE TODAY ALL THESE
THINGS THAT I HAVE ADDRESSED TODAY THIS YEAR ARE TRUE FACTS.

p.s. please help me and so many other here in the states. ↙

Sign: DEPRIVED OF A FUTURE



*Internship
Application*

June 18, 1999

Ms. Sandra L. Thurman
Director, Office of National AIDS Policy
808 19th St NW
Washington, DC 20006

Dear Ms. Thurman:

I was inspired by your remarks at the U.S. Conference of Mayors luncheon meeting prior to the Vice President speaking last Monday. Thank you so much for taking time out of your busy schedule to address the mayors of this country on such a critical subject.

I wanted to follow up on my brief conversation with you regarding a young woman from Cedar Rapids, Iowa who has done so very much to bring HIV/AIDS awareness to this community over the past four years. Her name is Alexia Abernathy. Alexia just graduated from high school and plans to attend Colorado State University in Ft. Collins next fall in anticipation, I think, of studying veterinary medicine. Alexia has had an extraordinary commitment to the HIV/AIDS issue. She has motivated and galvanized dozens of other young people. She has spoken all over the city and the state. Alexia is a bright, articulate, gregarious, talented and attractive young woman. She is so committed to this issue that she held her graduation party in the garden of Claire House which is a residential living community for people with HIV/AIDS.

There are so many young people today who are involved in their communities and provide the many, many bright spots that provide vivid contrast to the horrific things we hear in the media, but seldom do you find a young person with the commitment and sheer tenacity that Alexia has. She is truly a gifted and very remarkable young woman. I do not know in what ways you might be able to use her talents, but I wanted you to know about her. I have talked with Alexia about you, and she has given me permission to write this letter. If you would like to communicate with her, you may reach her at: (319) 364-2041 or her address is: 2070 Cottage Glen Rd SE, Cedar Rapids, IA 52403-1902.

Thank you for your consideration of Alexia and for your time at our meeting in New Orleans.

Best regards,

Lee Clancey
Lee R. Clancey
Mayor

Cc: Alexia Abernathy

*45 G-2742
called - left a voice mail
w/ number of the
intern office
G-24-99*

July 23, 1999

Mr. Merv W. Nielson
1225 North Locust Lane
Provo, UT 84604

Dear Mr. Neilson:

Thank you for your letter of July 1, 1999. It was good to hear from you. I am glad to know the USA Today feature on the Presidential Mission to Sub Saharan Africa reached you and affected you as it did.

As you may know, Vice President Al Gore recently released the report on Africa to the public. I am hopeful that public coverage of HIV/AIDS will lead to more individuals like you discussing AIDS and human sexuality in a public forum. The Presidential Mission to Zimbabwe, Zambia, Uganda, and South Africa broadened my perspective on this global pandemic immensely. A message like "abstinence before marriage, fidelity after marriage" is simply not an end-all message for stemming the tide of this pandemic. There are many other factors like homophobia, sexism, and classicism intertwined in this devastating plague. To achieve our common goal of ending the HIV/AIDS pandemic, it is integral that we bring our differences in ideology to the surface, and put forth a united front against the spread of this killer.

I invite you to join me in fighting HIV/AIDS. Together we can truly make a difference.

Sincerely,

Sandra L. Thurman

July 1, 1999
1225 North Locust Lane
Provo, UT 84604

Ms. Sandy Thurman
C/O USA Weekend
1000 Wilson Blvd.
Arlington, VA 22229

Dear Ms. Thurman:

In the USA Weekend issue, June 25-17, 1999, an article by Jeffrey Zaslow featured your work as President Clinton's AIDS policy director.

Your mission to combat this terrible disease is a noteworthy effort and I applaud your dedication to educate the children of our nation on sexuality and responsible behaviour.

I must say, however, that the agenda you propose for children, to wit, "If you are sexually active, safe sex is the ticket", has problems. May I suggest instead that the safest sex is NO SEX. Abstinence before marriage, fidelity after marriage is the only way that this disease can be stopped. You may consider this avenue as an unrealistic approach but the reality of the matter is that it is the truth. Afterall, this is real responsible behavior, is it not?

Everyone has the right to choose and I would be the first to step up and defend one's right to make choices. However, one must always remember that one cannot choose the consequences of his or her choices. Children should be taught to make proper choices. Such choices will guarantee happy consequences. This principle applies to adults as well.

I urge you to consider, "Abstinence before marriage, fidelity after marriage", in your message. Political and moral courage on your part is "the ticket" to turn the tide of this social disease.

You are in a viable position to win this war as the Director of the nation's AIDS policy program. May I wish you success in your battle.

Sincerely yours,



Merv W. Nielson

July 15, 1999

Lynn Veach Sadler
163 Wood Wedge Way
Sanford, North Carolina
27330

Dear Dr. Sadler:

Thank you for your recent letter. I appreciate your words of support and your sharing with me your poem/song, "AIDS and HIV – Why Me?".

Fighting on the front lines of the AIDS epidemic has not been easy and it continues to be a difficult journey. It is because of people such as yourself -- who help raise awareness about the HIV/AIDS epidemic -- that we will reach the end.

Thank you again for your support. I wish you the best of luck in your upcoming competitions and in all of your future endeavors.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

Human Technology Interface, Ink
(Dr.) Lynn Veach Sadler, Editor
163 Wood Wedge Way
Sanford, North Carolina 27330
Phone: (919) 499-9216
FAX: (919) 498-1416
lynnsadler@usa.net

July 2, 1999

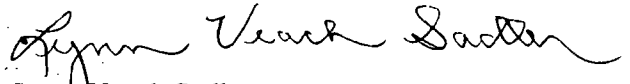
Ms. Sandra L. Thurman
Director
National AIDS Policy Office
808 17th Street, 8th Floor
Washington, DC 20006

Dear Director Thurman:

You may never have a use for the enclosed poem/song, "AIDS and HIV—Why Me?," but it might at least be of interest. My music partner (Alton A. Hartness) and I will shortly be sending it out to competitions.

Best wishes for your important work.

Sincerely yours,



Lynn Veach Sadler

Lynn Veach Sadler

Lynn Veach Sadler has a B.A. from Duke and an M.A. and a Ph.D. from the University of Illinois. Formerly a college president in Vermont, she has won an Extraordinary Undergraduate Teaching Award, pioneered in Computer-Assisted Composition, and received the Distinguished Women of North Carolina Award for education. Her academic publications include five books and some sixty-eight articles, and she has edited eighteen books/proceedings and three national journals. She now runs a small press and is a creative writer. A book of poetry, *Poet Geography*, is forthcoming in the Mt. Olive College Poetry Series; her poems have been published in, or are forthcoming in, for example, *Asheville Poetry Review*, *Journal of African Travel Writing*, *Main Street Rag*, *The Wolf Head Quarterly*, *Pudding Magazine*, *Lite*, *Bay Area Poets Coalition Anthology*, *The Abiko Literary Quarterly*, *The Robert Frost Review*, *Poet's Page*, *Amelia*, *The Sandhills Review*, *Snakeskin Poetry Webzine*, and *Whiskey Island Magazine*. Her stories have been published widely and have won the North Carolina Writers' Network and the *Talus and Scree* competitions. Her novel, *Tonight I Lie with William Cullen Bryant*, selected for the 1992 Blumenthal Writers and Readers Series, was runner-up for the 1997 Dana Award. For her first play, *Gnat* (a spin-off of the 1831 Nat Turner uprising; performed 1996), the (professional) Temple Theater (Sanford, NC) received the New Works grant from the North Carolina Arts Council and the New Play Award from the Paul Green Foundation; the play received a Paul Green Multi-Media Award from the North Carolina Society of Historians. *Sassing the Sphinx* was commissioned for the First International Robert Frost Symposium, and she recently completed her first musical (libretto, lyrics), *Coming Country* (on the Battle of New Orleans, War of 1812).

Lynn Veach Sadler, Ph.D.
163 Wood Wedge Way
Sanford, North Carolina 27330
Phone: (919) 499-9216; FAX: (919) 498-1416; lynnsadler@usa.net

AIDS and HIV—Why Me?

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

Mother and matron,
maven of domestic arts.
If they have to know,
make sure they know
it's from blood transfusion.

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

Child of Mumbai streets.
Now Mother Teresa's ward
in her AIDS Section.
I don't feel ill.
I don't know why I'm here.
I don't know why I'm here.

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

I can't let them know.
Massai with malaria.
That's the part I'll play.
I hail their van:
"I have malaria."

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

I was sharp and slick.
Always took care of business.
I was sharp and slick.
The doctor lies.
I don't know why I'm here.

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

I'm God's Messenger.
Dosing you with your evil.
You can die like me.
You won't be safe.
I'm God's Messenger Boy.

AIDS and HIV.
Why me?
Why me?
Why me?
AIDS and HIV.
Why me?

July 15, 1999

Mary K. Layman
132 West Inglewood
Broken Arrow, Oklahoma
74011

Dear Ms. Layman:

Thank you for your letter. I appreciate your suggestion about the treatment of AIDS. Increased funding for HIV/AIDS research remains a top priority for my office and this Administration because I share your vision about the importance of finding new treatments for this devastating disease.

Although the Office of National AIDS Policy works solely with HIV/AIDS policy issues, I suggest that you contact the National Institutes of Health (NIH) for questions pertaining to HIV/AIDS research. The contact information for the NIH AIDS Research and Reference Reagent Program (AIDS Reagent Program) is as follows:

NIH AIDS Research and Reference Reagent Program
McKesson HBOC BioServices
621 Lofstrand Lane
Rockville, MD 20850
Telephone: 301-340-0245
Fax: 301-340-9245

I wish you the best of luck in your efforts to promote new treatments for HIV/AIDS and I hope the information I have been able to provide will be of some help.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

132 W. Inglewood
Broken Arrow, OK 74011
June 29, 1999

Dear Ms. Thurman:

Have you considered the efficacy
of photoluminescence for the treatment
of AIDS?

If not, perhaps you might be
interested in contacting William C. Douglass,
M.D. at P.O. Box 467939, Atlanta, GA, 31146-7939
or by calling 800-728-2288.

Sincerely,
Mary K. Layman

Draft
Response

—

Withdrawal/Redaction Marker

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National AIDS Policy Office

OA/Box Number: 21062

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July 14, 1999



[001]

Thank you for your letter. I am sorry to learn of the alleged violation of your confidentiality and your consequent eviction from your house. While addressing the rights of people infected with HIV is at the top of this office and the Administration's agenda, the Office of National AIDS Policy cannot provide legal assistance to any individual.

I suggest that you contact the Department of Justice for more information about how to file a complaint. Their number is 202-514-2000. The Attorney General's Office can be reached at 202-514-7566.

I hope that the information I have provided will be of some help and I wish you the best of luck in your efforts to secure legal counsel.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

(b)(6)

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
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National AIDS Policy Office

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Dear Sandy Thurman [0016] 6-14-99

I write To you in Hopes you
can Help Me or Direct Me to Someone
who Can Help Me. My Name is [REDACTED] (b)(6)
I Live in Oakland County Mich. I Am
presnently serving a 1yr Sentence in the
Oakland Co Jail.

I n Aug of 1998 I was Assaulted
By My wife, A Oakland County sherriff Deputy
Wns visiting My Niebor So I Approached Him
To File A Complaint.

My Fore head was Bleeding slightly
Notking that would Indanger anyone or Be
of Concern. This Deputy who's Name
is Terry Summerville, Told my Niebor
I Had the Incurable Disease or HIV

this Caused a lot of Problem's in
My life. shortly Befor this Happen I was
Served A Eviction Notice From were
I Lived. Mr Summerville Worked very
close with the Manager of were I
Lived in A Neighborhood watch program.

Althow I can't Prove this Had Any
thing to do with My Eviction I Believe
it Did. But More Important is

these Facts, 1) He violated my Right To confidentiality under the Michigan Public Health Code section 5131 Act 488 of 1988 - Act 174 of 1989 Act 271 of 1989 Act 86 of 1992 And Act 200 of 1994

this is punishable by imprisonment up to 1 yr and or up to \$5000 Fine.

I Have SEARCHED For A Attorney For almost 6 months And can not Find one To sue I'am also seeking To Hold the sheriff Dept Responcable As To the Fact Terry summervill was not Told By Me or My Family ABOUT My HIV statis And I did not Give the sheriff Dept permission To Tell Anyone including there Deputy's.

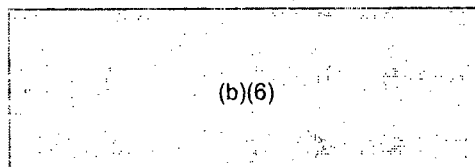
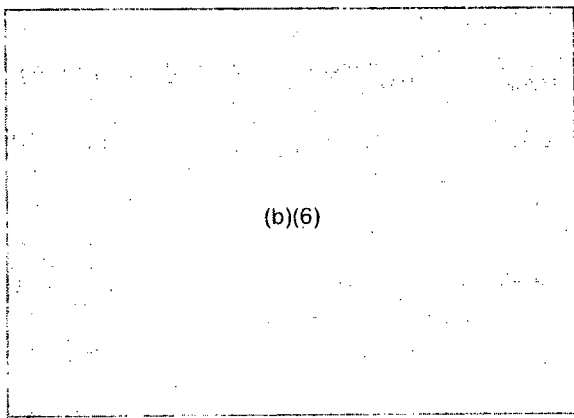
Only Booking and the Clinic At the sheriff Dept New And Someone is Telling the Deputy's ABOUT this.

I'am also Seeking To Bring charges Against this Deputy But I Don't Believe The prosacuter's office will. Do Anything Because He's A sheriff Deputy.

IF you could Direct Me to Were I could File A complaint with the Attorney General's office I would greatly Apprecate your

Help in this Matter.

Thank you



July 14, 1999

Mr. William R. Van Pelt
1430 California #11
San Francisco, California
94109

Dear Mr. Van Pelt:

Thank you for your letter dated June 29, 1999. I regret to inform you that there are no positions available at the Office of National AIDS Policy. I am sure, however, that there are many employment opportunities elsewhere for a person with your experience. As you know, the AIDS epidemic is far from over and I appreciate your interest in working in this field.

I wish you the best of luck in your search for employment in Washington, D.C.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

June 29, 1999

Sandy Thurman
AIDS Policy Director
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20003

Dear Ms. Thurman:

I am submitting my resume' for the consideration of the position within your area of management. For the last two years I have held the position of Manager of Testing, North America for Adecco, the world's largest personnel firm. I have a total of 8 years of management and project experience and have been promoted several times over the course of my career with Adecco.

As my resume' outlines I have extensive experience in the successful implementation and management of projects on a national and international level. I know that my diverse corporate experience would enhance any organization. One example of a success while at Adecco has been the successful development and implementation of an industry-leading pre-employment testing system throughout 500+ offices. I also created a specialized division of the company, which grew to be one of the most profitable ventures for Adecco. I have extensive experience in managing several projects consecutively with the ability of shifting priorities based at the direction of the Executive Management Team. I have also managed all budgetary requirements for each project as well as an annual departmental budget. I know that these types of successes and management experience would benefit any organization.

I am seeking a position in the Washington, D.C. area that will utilize my experience to enhance the mission and quality of an organization such as the AIDS Policy initiative. I will be in Washington, D.C. July 19th through July 23rd and would appreciate an appointment to further discuss my qualifications for this or additional opportunities. During the day I can be reached discreetly at my office at 650/610-1115 or in the evenings and weekends at the phone number indicated on my resume'.

Sincerely,

A handwritten signature in black ink, reading "William R. Van Pelt". The signature is fluid and cursive, with the first name "William" and last name "Pelt" being more prominent.

William R. Van Pelt

William R. Van Pelt
1430 California #11
San Francisco, CA 94109
415/474-8490

OBJECTIVE

Seeking a management position that utilizes training, development and implementation skills, which will allow for the overall growth, effectiveness and quality improvement of an organization.

PROFESSIONAL EXPERIENCE & ACCOMPLISHMENTS

Manager of Testing, North America at Adecco Employment Services (Formerly Adia Personnel Services - \$12 billion in sales): 1997 - Present

- Managed more than 8 vendors in the development of a new comprehensive evaluation system named Xpert including more than 80 pre-employment tests to be used throughout 500-branch network.
- Developed comprehensive training curriculum and support materials for the launch of the new Xpert Evaluation System including presentation materials, workbooks, exercises and class evaluations.
- Supervised 12 trainers in the deployment of new Xpert Evaluation System Training Program resulting in more than 42 training classes within a nine month time period. All classes achieved a 90% rating or higher.
- Managed the development of manuals, workbooks, computer training, reference manuals, communications materials and more.
- Coordinated multiple departments and vendors in the development of new sales support materials including electronic presentations, brochures and evaluations.
- Coordinated the distribution of new Xpert Evaluation System including technical interfaces, distribution of hardware, software, logistics and set-up procedures.
- Managed the Testing Department budget within 90% of budget requirements (\$6 million per year).

Manager of Operations, North America at Adecco Employment Services (Formerly Adia Personnel Services - \$12 billion in sales): 1996 -1997

- Pioneered and developed Project Staffing Services, a new sales channel, resulting in more than \$3 million in incremental revenue per year. Clients included Ford Motor Company, The Nature Company, The Money Store and others.
- Hired, trained and supervised customer service staff to manage daily operations of Project Staffing Services.
- Managed the development and communication of all operational policies and procedures for 500-branch network
- Wrote, maintained and reported on ISO 9002 standards for the Operations Department.

William R. Van Pelt (continued)

Contract Services Manager, North America at Adecco Employment Services (Formerly Adia Personnel Services - \$12 billion in sales): 1993 -1995

- Administered more than 27 national contracts resulting in \$90M in annual sales. Responsibilities including development of all compliance reporting for pricing and performance.
- Developed and implemented new automated reporting system/model deployed throughout entire branch network resulting in streamlined reporting process and more than \$100K in cost savings.
- Participated in the presentation and proposal process as subject matter expert for service compliance.

Office Supervisor, Irving, TX at Adecco Employment Services (Formerly Adia Personnel Services - \$12 billion in sales): 1991 -1993

- Managed the daily operations and customer service process for area branch resulting in more than \$12M in sales revenue.
- Responsibilities included recruiting, interviewing and hiring of more than 100 temporary employees per week, for more than 50 accounts.
- Developed set-up and operational process of new telemarketing operations for regional client resulting in the hire of more than 1,500 telemarketers.
- Trained new personnel on Adecco policies, procedures and daily operations of the branch.
- Managed the overall profitability of the branch resulting in 268% growth in revenue within 18 months.

EDUCATION

Southern Methodist University	Bachelor of Arts, Sociology	1990
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ASSOCIATIONS

American Management Association	1995-present
NAMES Project volunteer, San Francisco, CA	1997
SMU Volunteer Team member, Belize, Central America	1990
Outstanding College Students of America	1989
Hurricane Gilbert Relief Team member, Reynosa, Mexico	1989
Dean's List	1986-1987

REFERENCES

Available upon request.

July 14, 1999

Jacqueline Signori
304 West Broadway
Fairfield, Iowa
52556

Dear Ms. Signori:

Thank you for your letter and your kind words of support. I am sorry to learn of the loss of your cousin to AIDS. As the virus continues to spread, more families, both domestically and abroad, will continue to be touched by HIV/AIDS.

Although there is not currently an AIDSRide in Iowa, there are numerous rides annually around the country. I have participated in several AIDSRides, including the recent ride that ended in Washington D.C., and I encourage you to participate in a ride. Taking part in an AIDSRides is an inspiring experience that helps raise awareness about HIV/AIDS and helps support worthy AIDS organizations around the country. If you are interested in taking part in an AIDSRide or perhaps organizing a ride in Iowa, American AIDSRide can be reached at 1-800-825-1000 for more information.

Fighting on the front lines of the AIDS epidemic has not been easy and it continues to be a difficult journey. It is because of people such as yourself -- who are willing to join the fight against AIDS -- that we will reach the end.

Thank you again for your support. I wish you the best of luck in all of your future endeavors.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

Amer. AIDS Ride
1-800-825-
1000

Twin Cities -> Chicago
773-890-
8812

Find out if there's
an AIDS WALK
IOWA +
draft response.

Jacqueline Signori
304 W. Broadway
Fairfield, IA 52556



Andy Thurman
AIDS Policy Director
The White House
1600 Pennsylvania Ave
Washington, DC 20002

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. note	Jacqueline Signori to Sandra Thurman re: AIDS victim (Personal) [partial] [One page closed in whole] (2 pages)	00/00/0000	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21062

FOLDER TITLE:

Random Letters [4]

2018-0764-F

jm2228

RESTRICTION CODES

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

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

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

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

RR. Document will be reviewed upon request.

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

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

organizing one? Governor's
Office?

Any help will be
greatly appreciated.
Keep the faith.

Sincerely,
Reginald Sykes

jmm551@hotmail.com

304 W Broadway
Fairfield, IA 52556

515-472-7810

Dear Mr. Thurman,

I am interested in
working in any capacity
to renew our fight
against AIDS.

In 1993 my 43-year old
cousin (b)(6) died
from the disease. I am
dedicated to eradicating
this insidious virus.

[002]

In USA Today I read about
your leading (w/others) the
Michigan AIDS Walk in Sept.
Is there one set for Iowa?
If not, how do I go about

July 15, 1999

Craig Shniderman
Executive Director
Food & Friends
57 L Street, S.E.
Washington, D.C.
20003

Dear Craig:

It was so wonderful to see you again on this year's Ride. Honey, who knew Spandex would be such a recurring theme in our line of work?

Thank you for sending over Brent Minor's resume. I have always been impressed by his passionate leadership as an advocate for all those living with HIV and AIDS – and certainly by his unwavering commitment to the Food & Friends team. I am very pleased by his interest in joining the Presidential Advisory Council on HIV/AIDS.

Please know that I will support Bruce in any way that I can. Keep me posted!

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

July 6, 1999

Snyderman
Craig Snyderman
Executive Director
Food & Friends
57 L Street, S.E.
Washington, DC 20003

Dear Craig:

It was so wonderful to see you again on this year's Ride. Honey, who knew Spandex would be such a recurring theme in our line of work?

Thank you for sending over Brent Minor's resume. I have always been impressed by his passionate leadership as an advocate for all those living with HIV and AIDS – and certainly by his unwavering commitment to the Food & Friends team. I am very pleased by his interest in joining the Presidential Advisory Council on HIV/AIDS.

Please know that I will support Brent in any way that I can. Keep me posted!

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

*This is fine -
pls. put on
letterhead
(Sarah
drafted)*

*Det. of
personnel don't make
decisions
Does she want to
mention specifically
How she will support
him?*

write letter to

Craig thanking him -

We're very supportive

etc. . . .



June 28, 1999

Ms. Sandy Thurman
Director
White House Office of
National AIDS Policy
736 Jackson Place, NW
Washington, DC 20503

Dear Sandy:

I am in the early stages of recovery from the ride. It was stunningly successful in every dimension and as always, we were so glad to have you with us. You went to a lot of trouble to participate and we are very appreciative. I hope that our friendship and your involvement with Food & Friends continues long after you conclude your present duties.

I would very much appreciate your help with a matter of some importance to Food & Friends. Next month, 12 positions will become available on the Presidential Advisory Council on HIV/AIDS. Brent Minor, Director of Public Funding and Community Relations, at Food & Friends is very interested in an appointment to the Council and I very much hope that he is selected. Brent has been a member of the Food & Friends staff for 8 years and is a genuine leader in the HIV/AIDS community. He represents Food & Friends with respect to Ryan White funding matters. Additionally, he is co-chair of our Ryan White Title I Planning Council and he serves on the State of Virginia Title II Consortium. Brent has been HIV positive for 12 years and brings to our work a passionate personal commitment and excellent political judgement.

Brent has spoken with John Berry and Karen Tramontano. However, among the people I know, you are best positioned to speak about Food & Friends as a context for Brent's selection. My endorsement is unequivocal and I believe Brent's selection would be good for the community. I leave it to you, if you are willing to help, to make the right choice of contacts.

Thanks so much for everything you do and for being one of America's foremost cyclists. My best regards and thanks to Sarah as well.

Sincere regards,

Craig M. Shniderman
Executive Director

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. resume	re: Brent Minor [Personally Identifiable Information] [partial] (1 page)	00/00/0000	b(6)

COLLECTION:

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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Brent Tucker Minor

(b)(6)

[003]

2910 Sycamore Street
Alexandria, Virginia 22305
202-863-1825 (o) 703-836-1162 (h)

WORK EXPERIENCE

Food & Friends

August, 1991 - Present

58 L Street, SE
Washington, DC 20003

Positions Held:

Director of Community Relations

April, 1996 - Present

Coordinate the community and public relations efforts for the agency including press contacts and coverage, community meetings and general inquiries. Represent agency at local and national meetings, events and conferences. Represent agency on Ryan White committees and consortia. Write and edit agency newsletter, Annual Report and other agency-wide publications or articles. Research and write public funding requests (non-Ryan White) including monitoring grants for compliance and evaluation. Assist with Ryan White reporting and follow-up as needed.

Conference Coordinator

February - November, 1996

1996 AIDS Meals Providers Conference

Directed all conference activities for annual international meeting of AIDS food service providers including fundraising, program development, event planning, publications and site management. Highlights include: Doubled number of participants; Tripled previous fundraising levels; increased number of education sessions from 11 to 41.

Program Director

December, 1993 - April, 1996

Directed operations of Program Office to insure accurate daily delivery of meals to over 500 clients (homebound people living with AIDS). Supervised activities of the following departments: Delivery (1200 daily meals); Volunteer Resources (recruitment, coordination and retention of 800 volunteers); and Client Services (management and referrals of 500 monthly clients). Wrote and edited monthly Volunteer Newsletter. Coordinated volunteer-staff events. Represented organization at various functions including fundraisers and consortium meetings. Supervised staff of 13 people.

Volunteer Program Manager (1/93 - 12/93)

Volunteer Coordinator (8/91 - 1/93)

Director of Development

July, 1998-October, 1990

Bishop McNamara High School
Forestville, Maryland

Established and directed development programs including annual giving, major donor solicitations, phone-a-thons and student fundraisers. Created, wrote and edited the Bishop McNamara Bulletin. Established and maintained accounting records for pledges and gifts received. In two years, annual contributions grew from \$18,000 to \$76,000.

Associate Director

November, 1986-December, 1987

Ward, Dreshman & Reinhardt, Inc.
Worthington, Ohio

Represented firm as fundraising consultant for two projects: The Episcopal Diocese of Atlanta (\$4 million goal) and The Japanese Cultural Center of Hawaii (\$10 million goal). Participated in development of campaign goals, strategy and organization. Wrote and designed campaign literature for major gift solicitations, grant proposals and general campaign. Supervised large public kick-off event for both campaigns.

ADDITIONAL EXPERIENCE**At-Large Representative and Co-Chair**

March, 1994 - Present

Metropolitan Regional HIV Health Services Planning Council
Washington, DC

Serve as at-large representative and Co-Chair of Planning Council that determines allocation of Ryan White Title I federal funding for designated area which includes Washington, DC, as well as large parts of Maryland, Virginia and West Virginia. Planning Council is responsible for determining funding priorities, allocation of funds and program oversight. Current funding responsibility is approximately \$16 million.

Serve as Chair of the Planning Committee of the Planning Council which coordinates the planning and evaluation efforts of the body. Committee has the responsibility to lead the process for determining community priorities, analyzing data, recommending funding levels, and monitoring service performance.

Serve as a member of the Executive Committee of the Planning Council which coordinates all Planning Council activities and meetings. Committee meets monthly to determine agenda items and general direction of the Planning Council.

Served as Chair of the *ad hoc* Grievance Committee that established grievance procedures for the Planning Council as directed by HRSA (1996).

Served as Chair of the PWA Committee which coordinates the efforts of people living with HIV/AIDS on the Planning Council.

PWA At-Large Representative

March, 1994-Present

Northern Virginia HIV Consortium/Virginia Title II Consortia

Serve as at-large representative on the consortium that determines allocation of Ryan White Title I and II funds for Northern Virginia. Current funding responsibility is approximately \$2.8 million. Represent Northern Virginia on Virginia Title II Consortia.

Other Related Experience:

Served on Title I Grant Application Review Panel for Baltimore EMA, FY95 and FY96.

Served on Title II Grant Application Review Panel for Virginia, FY96.

Attended the 5th Annual Title I & II National Ryan White Grantee Meeting (1996).

Presented three workshops at the 1998 U.S. Conference on AIDS in Dallas.

Citizen Member

March, 1991 - Present

Alexandria Task Force on AIDS

Alexandria, Virginia

Serve on city-wide task force that reviews and makes recommendations for all AIDS-related policies for City Council action. Appointed by the Mayor and City Council as Citizen-At-Large member. Served as Chair from September, 1993 - September, 1995.

Class Representative

1988 - Present

The University of the South

Sewanee, Tennessee

Serve as liaison between university and alumni class of 1981. Oversee general solicitations, major donor prospecting and reunion planning. Write bi-annual class newsletter. Have achieved or exceeded targeted giving levels in 8 of 9 years.

President

1992 - Present

The Minor Foundation

Charlotte, North Carolina

Serve as President of the Board of Directors (7 members) of family foundation. Coordinate research and eligibility of grant applicants, funding distribution and oversight. Chair bi-annual meetings.

EDUCATION

University of the South, Sewanee, Tennessee

B.A. Degree - Awarded May, 1981

Honors and Activities: Speaker, Student Assembly; Honor Council; Order of Gownsmen (academic honorary); Alpha Tau Omega Fraternity.

Woodberry Forest School, Woodberry Forest, Virginia

College preparatory diploma awarded, May, 1977.

ACTIVITIES

Performer with the Washington Opera; Volunteer with Whitman-Walker Clinic of Washington, DC and So Others May Eat (SOME); Member, Christ Episcopal Church, Georgetown; Extensive volunteer political campaign work; Former *Jeopardy!* contestant; Triathlon enthusiast (Have completed 30 Olympic-distance events, most recently 8/98.)

July 14, 1999

John W. Bush, Ph.D.
551 Vistamont Court
Berkeley, California 94708

Dear Mr. Bush:

Thank you for writing to express your views. Although we disagree on the best methods of responding to the HIV/AIDS crisis, I do value your taking the time to share your thoughts with the White House.

I am concerned that you understand that my advocating on behalf of greater research and services for those infected with or affected by HIV/AIDS is by no means meant to de-emphasize the importance of fighting other ailments. We all must choose our battles. After seeing countless friends taken too soon by weakened immune systems, it is the battle against HIV/AIDS to which I am called.

Again, thanks for writing. Best wishes in all your future endeavors.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy

c/o 551 Vistamont Court
Berkeley, California 94708

28 June 1999

Ms. Sandy Thurman
Director of the Office of National AIDS Policy
c/o The White House
1600 Pennsylvania Avenue NW
Washington, D.C. 20501-0001

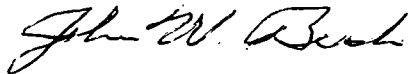
Dear Ms. Thurman:

I must correct a misconception you have propagated in the final paragraph of the enclosed article (Complacency could kill us. *USA Weekend*, 25-27 June 1999, p. 4). Whatever you may know of the litany of arguments debunking HIV as the causative agent of AIDS, please consider my recent quasi-formal logical restatement of what Professor Peter Duesberg has said from the beginning of the controversy

HIV+ $\neq$ AIDS
Any of 30 specified diseases $\neq$ AIDS
HIV+ + any of 30 specified diseases = AIDS
Cure of HIV $\rightarrow$ 30 specified diseases remain
Cure of 30 specified diseases $\rightarrow$ HIV becomes insignificant

The bottom line is that we should not have spent one cent on AIDS research nor should we spend research money, however plentiful, trying to eradicate HIV or develop a vaccine against it. A far more valuable approach for world health would be to spend research funds on the associated diseases and on research leading to vaccines via such approaches as the findings of Heithoff *et al.* (*Science*, 7 May '99, pp. 976-970 ; commentary, Enserink, *ibid* , p. 883) for bacterial diseases, including cholera, that have been refractory to vaccines in the past.

Respectfully,



John W. Bush, Ph.D.

cc: Professor Peter Duesberg
Professor Bruce N. Ames

DRAFT

July _____, 1999

Honorable Thomas F. Shields, MD
 State Representative
 Maine House of Representatives
 2 State House Station
 Augusta, Maine 04333

Dear Representative Shields:

Thank you for your letter of June 30 in which you raise a number of issues related to HIV counseling, testing, and surveillance. We appreciate and share your concern about addressing the AIDS epidemic.

You have inquired about the issue of confidential HIV testing. While ^{surveillance} final regulation on the Administration's policy is currently under review, there are several tenets we believe are fundamental. First, we support the development of HIV surveillance systems in all states. Second, confidential and anonymous HIV counseling and testing must be available. Third, protections of confidentiality for those who do get tested must be maintained and in some cases strengthened.

As for the debate between different types of HIV surveillance systems, each state should have the flexibility to use whatever system meets its own unique needs. The focus should be on the timeliness and quality of data obtained in those systems so that we can have a better understanding of where this epidemic is moving.

In addition, we are looking at new ways to encourage people at risk for HIV infection to seek voluntary counseling and testing services. You correctly note that knowing one's status is critically important both to stop further infections and to help get people into proper care. For that reason, we do not support mandatory testing and partner notification schemes. Forced testing and partner notification systems may dissuade people from knowing their status, particularly when voluntary systems have been demonstrated to be fully effective. ^{Mr. Appraisal says} ^{seen ill-advised,}

This Administration will continue to support states and local communities in an effort to stop further infections and care for those already impacted. Your continued leadership in the fight against this deadly epidemic and in developing a caring and compassionate response to those living with HIV and AIDS is truly appreciated.

Very truly yours,
 SLT

seeking health care
 and result in
 fewer individuals
 leaving states
 of their HIV

MSC
left us

July 26, 1999

Shannon Nettles
115 Mary Drive
Wetherford, TX 76086

Dear Ms. Nettles:

Thank you for your letter dated June 10, 1999 about entering the field of HIV/AIDS law. The many issues related to HIV/AIDS discrimination are of key concern to me and I am working hard to bring about legislation that would prohibit discrimination, and foster an environment of compassion and tolerance for people with HIV/AIDS. However, until this environment is established, the need for people willing to defend the rights of people living with HIV/AIDS are greatly needed by our community.

I have a few suggestions for you on organizations to contact that would be able to provide you with information about entering the field of HIV/AIDS law. Some of the key organizations dealing with these issues include:

AIDS Action

1906 Sumerland Place NW
Washington, DC 20036
Phone: 202-530-8030

The largest HIV/AIDS lobbying organization in the country working on a variety of HIV/AIDS related policy issues

AIDS Coordinating Project of the American Bar Association

740 15th Street NW
Washington, DC 20005-1009
Phone: 202-662-1025

Coordinates the ABA's response to the AIDS epidemic and operates the ABA's pro bono project on AIDS

American Society of Law, Medicine and Ethics

765 Commonwealth Avenue
16th Floor
Boston, MA 02215
Phone: 617-262-4990

Addresses issues related to health policy, law and ethics in the AIDS epidemic.

American Immigration Lawyers Association

1400 I Street NW
Suite 1200
Washington, DC 20005
Phone: 202-371-9377

Provides legal assistance and referrals to people living with HIV/AIDS, especially recent immigrants and undocumented aliens

Harvard AIDS Law Clinic

122 Boylston St
Jamaica Plain, MA 02130
Phone: 617-522-3003

Provides direct legal support for people affected by HIV/AIDS

I hope that these contacts provide you with the information you need to begin your involvement in the field of HIV/AIDS law. While working on such an emotional issue can be challenging, it has proven to be very rewarding as well. The chance to make a difference in the lives of so many is an admirable goal and I wish you the best of luck in your efforts.

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

Shannon Nettles
115 Mary Dr.
Weatherford, TX 76086
(817) 444-4814
OlaDulce@aol.com

*Do we
have a draft
for this?*

June 10, 1999

Office of National AIDS Policy, Executive Office of the President
850 17th St., NW, Ste 820
Washington D.C. 20006

To Whom it May Concern:

I am a third year law student at Texas Tech University School of Law in Lubbock, Texas. I am interested in the area of HIV/AIDS law and would like to ask you a few questions.

I would appreciate it if you could tell me how I might enter this field, what this type of practice entails emotionally, and how you view the workload. Specifically, I would like to know what issues you handle. I am not only interested in practicing in this area of law, but also would like information regarding other types of positions available within your organization.

I realize not many people practice in this area, therefore I am willing to relocate where needed. I enjoy working with people, learning, researching all types of subjects, and traveling. I am familiar with the legal research tools of WestLaw and Lexis, the Internet, and several types of wordprocessors. Also, I will be taking a class on disabilities and the law which will focus on the Americans with Disabilities Act in the fall.

Although I am hearing and visually impaired, I do not consider myself handicapped. My condition has required that I learn to do some things differently in order to remain competitive with my classmates. For example, I use readers to keep up with the text in classes and adaptive software on my computer to do research and write papers. I believe this experience has given me a greater capacity to cope with difficult situations which require quick solutions. I think this skill is one that can serve me well in any career I choose, but especially in a field that requires versatility.

*Harvard
AIDS
Law
Clinic*

I would greatly appreciate any information you can give me on HIV/AIDS litigation and how I might enter this particular field of law and other types of positions available. You may contact me at the above address, telephone number, or e-mail address. I have enclosed my resume to provide further background information on myself. I would appreciate any recommendations you can make regarding classes I should take or other activities I should get involved in.

Thank you for your time and consideration.

Sincerely,

Shannon Nettles
Shannon Nettles

*American Bar Association (ABA)
AIDS Condensing Project
phone (202) 662-1025*

*American Society of Law, Medicine, &
Ethics
(617) 262-4990*

Shannon Nettles
115 Mary Dr.
Weatherford, Texas 76086
(817) 444-4814

Education:

Texas Tech University School of Law
JD expected May 2000
Sam Houston State University August 1994-May
BA Political Science & History 1997 (Double Major)
Minor in English

Employment:

Volunteer, Lubbock Rape Crisis Center Currently
Clerk for Doug Hudman Winter Break 1998
Intern for Lubbock Country DA Summer 1998
Volunteer, AIDS Rural Resource Center Summer 1997
-Weatherford, Texas
History Tutor for Sam Houston State
Athletes Fall 1996
Volunteer, AIDS Outreach Center Summer 1994
-Fort Worth, Texas
Volunteer, Tarrant County Democratic Summer 1994
Headquarters
Decker, Jones, McMackin & Associates Summer 1992 and
-Runner 1993

Organizations:

Texas Commission for the Blind conferences-attended
and served on panels
AIDS activist-addressed local school board, spoke with
school board members, wrote articles for newspapers
(school and local)-regarding AIDS education

Achievements:

Alpha Lambda Delta
Pi Sigma Alpha

References:

Elizabeth Schneider JD	John Holcombe Ph.D.
Texas Tech University	Sam Houston State University
School of Law	Dept. of Political Science
1802 Hartford	Box 2149
Lubbock, TX 79409	Huntsville, TX 77340

Charles Bubany JD
Texas Tech University School of Law
1802 Hartford
Lubbock, TX 79409

July 26, 1999

A Robert Neurath
Biochemical Virology
The New York Blood Center
310 East 67th Street
New York, New York 10021

~~O. P. B.~~
Blood
Center

Misc.
letters

Dear Mr. Neurath:

Thank you for sending me a copy of your report on July 22nd about the new research being done by the New York Blood Center on the development of a microbicide (B195) for the prevention of sexually transmitted diseases. It is always encouraging to hear of the tremendous efforts being undertaken by the scientific community to help prevent the spread of HIV/AIDS and other STDs, which is a top priority of this Administration.

I wish you the best of luck in future research on the B195 cream and thank you for your commitment to stopping the spread of HIV/AIDS and other STDs, which take such a toll on our communities.

Sincerely,

-S-

Sandra L Thurman
Director
Office of National AIDS Policy

**THE NEW YORK BLOOD CENTER
310 E. 67TH ST.
NEW YORK, NY 10021**

FACSIMILE TRANSMISSION

DATE: July 22, 1999

TO: Ms. Sandra L. Thurman
Director
National AIDS Policy Office
808 17th St., 8th floor
Washington, DC 20006

FAX: 202-456-2438

FROM: A. Robert Neurath
Biochemical Virology

Fax No.: 212-570-3299

Tel No.: 212-570-3275

E-Mail: rneurath@nybc.org

RE: RESEARCH ON PREVENTION OF SEXUALLY TRANSMITTED DISEASES

TOTAL NO. OF PAGES (INCLUDING COVER SHEET)...14

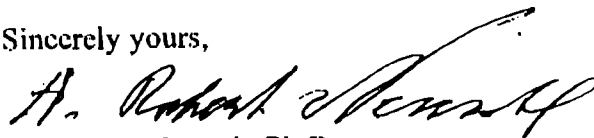
Dear Ms. Thurman:

We would like to bring your attention to our research on the development of a microbicide (B195) for the prevention of sexually transmitted diseases.

In *in vivo* experiments using animal models, the B195 cream: (1) had no irritating effects on vaginal tissues (rabbit model); (2) had pronounced antiviral activity in: (a) the mouse model for genital herpesvirus infection and (b) the monkey model for genital simian immunodeficiency virus infection. The B195 formulation also inactivated several bacteria associated with bacterial vaginosis, a significant contributing factor to sexual transmission of HIV.

I am attaching a copy of our paper entitled "Design of a 'Microbicide' for Prevention of Sexually Transmitted Diseases Using 'Inactive' Pharmaceutical Excipients" which was just published in *Biologicals*, as well as a report on B195.

Sincerely yours,



A. Robert Neurath, Ph.D.
Member and Laboratory Head
Biochemical Virology

Design of a “Microbicide” for Prevention of Sexually Transmitted Diseases Using “Inactive” Pharmaceutical Excipients



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Abstract. The human immunodeficiency virus (HIV-1) pandemic has been driven primarily by the sexual transmission of the virus, and facilitated by prior infections with other sexually transmitted disease (STD) pathogens. Although treatment of these STDs has been proposed as a means to decrease the rate of HIV-1 sexual transmission, preventive measures effective against both HIV-1 and other STD pathogens are expected to have a larger impact. These measures include topically applied mechanical and chemical (i.e. microbicidal) barriers. Microbicides of preference should have a broad specificity against diverse STD pathogens and a well established safety record, considering their repeated use over decades. Here, we report that cellulose acetate phthalate (CAP), an “inactive” pharmaceutical excipient, commonly used in the production of enteric tablets and capsules: (1) has antiviral activity against HIV-1 and several herpesviruses (HSV); and (2) when appropriately formulated, in micronized form, inactivates HIV-1, HSV-1, HSV-2, cytomegalovirus, *Neisseria gonorrhoeae*, *Trichomonas vaginalis*, *Haemophilus ducreyi* and *Chlamydia trachomatis* but does not affect *Lactobacilli*, components of the natural vaginal flora contributing to resistance against STDs. Thus, the CAP formulations meet the criteria for preferred microbicides and warrant further evaluation *in vivo* in humans.

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Introduction

Curable sexually transmitted diseases (STDs) of bacterial origin are the most common worldwide cause of illness with significant health, social and economic consequences. They can lead to long-term, serious complications and sequelae. The estimated annual (1995) worldwide incidence of four major curable STDs, syphilis, gonorrhoeae, chlamydia and trichomoniasis, was about 330 million.¹ Another treatable STD, chancroid, a genital ulcerative disease caused by *Haemophilus ducreyi*, is common in developing countries in Africa, Asia and Latin America where its incidence may exceed that of syphilis.² The proposed control measures for these STDs include: surveillance, laboratory diagnosis, syndromic management, data monitoring, treatment with antibacterial agents, partner notification, and development of vaccines.^{3–5}

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At least 20% of people in the United States have been infected with herpesvirus type 2 (HSV-2), which is usually transmitted sexually and can cause recurrent genital ulcers.^{6–7} The prevalence of HSV-2 infections is even higher in some developing countries.⁸ Although the infection is treatable by antiviral drugs, efficacious long-term suppression of genital herpes is expensive.⁹ The probability of further spread of the virus by untreated people and asymptomatic carriers not receiving antiviral therapy is extremely high, considering the high prevalence of infections. Other herpesviruses, including cytomegalovirus^{10–11} (HCMV), herpesvirus 6,¹² and herpesvirus 8,¹³ the causative agent of Kaposi's sarcoma, are also transmitted sexually.

The urgent need to prevent the transmission of STDs has become highlighted by the HIV/AIDS epidemic, resulting so far in infection of ~42 million people and in ~12 million deaths.¹⁴ The facts that HIV infections are not curable as of now, have become the leading cause of death among young adults and in decreased life expectancy in a number of countries, and the observation that several

non-viral STDs facilitate HIV infection, have further emphasized the pressing need for new preventive approaches.

The use of chemical barrier methods (topical "microbicides") under women's control has been proposed as a method to control the sexual transmission of HIV-1 and other STDs.¹⁵ The fastest way to introduce topical microbicides into practice appeared to be the application of over-the-counter (OTC) contraceptives containing the detergent nonoxonyl-9 (N-9). N-9 was shown to inactivate *in vitro* HIV-1,¹⁶⁻¹⁷ HSV-2¹⁸ and *Chlamydia trachomatis*.¹⁹ N-9 was also found to be cytotoxic. This approach seems to be hampered by clinical data suggesting the adverse effects of some N-9 formulations²⁰⁻²² and lack of efficacy in decreasing the rate of heterosexual HIV-1, gonorrhoea and chlamydia transmission by one of the N-9 formulations.²³ This indicates that other microbicidal compounds have to be tested as prophylactic agents against HIV-1 and other STDs.

Since efficacious topical "microbicides" would be expected to be used repeatedly over decades, they should have an established safety record and should preferably not be spread systemically after topical application. They should: (1) be inexpensive; (2) be produced from widely available resources; (3) have a broad specificity resulting in prevention of transmission of several STDs; and (4) inactivate the infectivity of the respective STD pathogens. In accordance with these requirements, we recently developed a potent anti-HIV and anti-herpesvirus agent, suitable for incorporation into topical gels/creams,²⁴⁻²⁶ by chemical modification with 3-hydroxyphthalic anhydride of the bovine milk protein, β -lactoglobulin. The disadvantage of this antiviral compound has been the lack of activity against bacterial STD pathogens (unpublished data). For this reason, we continued our effort to develop a topical microbicide from inexpensive, widely available resources. Here, we present the results of this effort, leading to a broad spectrum formulation consisting solely of pharmaceutical excipients with well established safety records. Some of the results presented here were briefly summarized under the code name B195 at the 12th World AIDS Conference.²⁹

Materials and methods

Measurement of anti-HIV-1 activity

All compounds (concentration range: 15.6 to 1000 μ g/ml) were first screened for anti-HIV-1

activity by measuring the inhibition of fusion between HIV-1 infected and uninfected cells.³⁰ In this assay, HIV-1 IIIB infected H9 cells were labelled by 2', 7'-bis-(2-carboxyethyl)-5-6-carboxyfluorescein acetoxymethyl ester (BCECF; Molecular Probes, Inc., Eugene, OR) according to the manufacturer's instructions. BCECF-labelled [9/HIV-1 IIIB cells (10^4) were mixed with 1×10^6 uninfected MT-2 cells. After incubation in a 96-well plate at 37°C for 2 h, the fused and unfused labelled cells were counted under an inverted fluorescence microscope at $\times 160$ magnification. At least 200 BCECF-labelled cells were counted and the proportion of fused cells was determined. These tests were carried out in the presence and absence of graded quantities of compounds to be screened.

The anti-HIV-1 activity of the two compounds giving positive results in the prescreening tests, namely cellulose acetate phthalate (CAP) and hydroxypropyl methylcellulose phthalate (HPMCP), was further tested and quantitated by the following additional tests: (1) inhibition of the cytopathic effect (cpe); and (2) inhibition of production of the HIV-1 nucleocapsid antigen (p24).³¹ MT-2 cells (10^4) in 96-well plates were infected with HIV-1 (a dose sufficient to accomplish a multiplicity of infection of 0.0045) in 200 μ l of RPMI 1640 medium supplemented with 10% (v/v) fetal bovine serum (FBS). After 1 h and 24 h, respectively, half of the culture medium was changed and replaced by fresh medium. On the fourth day after incubation at 37°C, 100 μ l of culture supernatants were collected from each well and an equal volume of fresh medium was added to the wells. The collected supernatants were mixed with an equal volume of 5% (v/v) Triton X-100 and assayed for p24 antigen using an ELISA kit from Coulter Immunology (Hialeah, FL). On the sixth day after infection, an indicator XTT Tetrazolium Dye (1 mg/ml; 50 μ l/well; PolySciences, Inc., Warrington, PA) was added to the cells. After 4 h, intracellular formazan formation was determined colorimetrically at 450 nm following the procedure described by Weislow *et al.*³² and the percentage of cpe was calculated. The negative control corresponded to cells mixed with culture medium, instead of HIV-1, while the positive control represented cells mixed with HIV-1 in the absence of the compounds. The cytotoxicity of the compounds for uninfected cells was measured using the same methodology.

Measurement of antiviral activity against herpesviruses

The antiviral activity of the selected compound, CAP, against several herpesviruses was also

determined. The activity against herpesvirus types 1 and 2 (HSV-1 and HSV-2) was tested as follows. Five-hundred microlitres of appropriate CAP dilutions in Eagle's Minimum Essential Medium (EMEM) were mixed with an equal volume of appropriately diluted infectious HSV-1 or HSV-2. The mixture was added to ELVIS HSV cells in 24-well plates. The ELVIS cells, as well as the media used were provided by Diagnostic Hybrids, Inc. (Athens, OH). ELVIS cells are derived by selection of Geneticin (G418; Sigma, St Louis, MO) resistant colonies, following cotransfection of baby hamster kidney cells with a plasmid which contains a G418 antibiotic resistance marker and a plasmid which contains an *E. coli lacZ* gene placed behind an inducible HSV promoter. The promoter is from the HSV-1 *UL39* gene segment which encodes ICP6, the large subunit of ribonucleotide reductase. This promoter has a number of features which make it ideal for the detection of HSV: (1) there is no constitutive expression from this promoter in uninfected cells; (2) activation of the promoter appears to be specific for HSV; (3) expression from this promoter occurs within hours after infection; (4) this promoter is strongly transactivated by the virion-associated transactivator protein VP16. As early as 6 h after infection, HSV-infected cells can be detected by measurement of β -galactosidase (β -gal) activity.³³ Twenty-four hours after infection in the presence or absence of graded quantities of CAP, the ELVIS cells were lysed with 1% (v/v) Triton X-100 and β -gal in the cell lysates was determined by an ELISA kit from 5' $\rightarrow$ 3', Inc. (Boulder, CO). This ELISA kit is capable of detecting and quantitating picogram levels of *E. coli* β -gal protein. The method is based on detection of the β -gal protein rather than of enzymatic activity. β -gal from *E. coli* is a tetrameric enzyme composed of four identical subunits. The individual subunits do not exhibit enzyme activity and are therefore not detectable by standard enzyme activity assays. The 5' $\rightarrow$ 3' β -gal ELISA kit overcomes this limitation by detecting the actual protein that is expressed.

Alternatively, antiviral activity against HSV-1 was measured using HSV *vgCL5*, a recombinant virus in which the expression of β -gal is under the control of the HSV-1 late gene *gC* regulatory region.³⁴ In this test, 50 μ l of MEM tissue culture medium containing 5% FBS and graded concentrations of CAP was mixed with 100 μ l of Vero cells in the same FBS-containing medium (10^6 cells/ml) for 30 min at 25°C. Subsequently, 50 μ l of HSV *vgCL5*, at a dilution sufficient to infect approxi-

mately 50% of cells, as determined by *in situ* staining for β -gal, was added and the mixture was placed into wells of 96-well plates. After incubation at 37°C for 24 h, the cells were either immediately lysed or frozen for 1 to 5 days for storage and subsequently lysed by adding to the cells and medium, 50 μ l of 2.5% (v/v) Triton X-100, containing protease inhibitors (PMSE, leupeptin and pepstatin, all at 10 μ g/ml). β -gal in the lysed preparations was detected by the ELISA kit from 5' $\rightarrow$ 3'.

Inhibitory activity against human cytomegalovirus (HCMV) was measured using the HCMV strain RC-256 (ATCC VR-2536), a recombinant of HSMV Towne containing the *E. coli lacZ* gene.³⁵ The inhibitory effect on replication of the β -gal expressing HCMV RC-256 was measured under conditions similar to those described for HSV *vgCL5*, except that the cell-virus mixtures were kept for 48 h at 37°C before measuring β -gal levels, and human foreskin fibroblast (HFF) cells were used.

Formulation of CAP

The following properties of CAP dictated its formulation: (1) low solubility in aqueous solutions at pH < 6;³⁶ (2) hydrolysis during storage in aqueous solutions at room temperature; and (3) solubility in several biocompatible organic solvents, for example, propylene carbonate, propylene glycol and polyethylene glycol, from which CAP precipitates upon contact with aqueous solvents (own unpublished data). To avoid these problems, a formulation of micronized CAP in glycerol (in which CAP is not soluble), was prepared. A preparation of micronized CAP (Aquateric containing 66–73% of CAP, a polyoxyethylene-polyoxypropylene block copolymer and distilled acetylated monoglycerides, used in aqueous media as an enteric film-coating liquid [FMC Corporation, Philadelphia, PA]) (15.9 g) was mixed with glycerol (70.2 g), and polyvinylpyrrolidone K-30 (Spectrum Quality Products, Inc., New Brunswick, NJ) (11.1 g) and crospovidone NF (ISP Technologies, Inc., Wayne, NJ) (2.8 g) were added in order to maintain the micronized CAP in suspension (=formulation I). Another formulation (II) was prepared by replacing polyvinylpyrrolidone + crospovidone with colloidal silicon dioxide M-5P (Cabot Corp., Cab-O-Sil Division, Tuscola, IL), an excipient with an established use in vaginal preparations.³⁶ This formulation contained 23.7 g Aquateric and 7.89 g silica per 100 g glycerol. All components of these two formulations were USP grade and have been approved for human medicinal use.³⁶

Inactivation of several sexually transmitted pathogens by CAP formulations

To study the effect of formulated CAP on HIV-1, HSV-1, HSV-2 and HCMV, the respective virus suspensions were mixed with an equal volume of the CAP formulations (each pre-warmed at 37°C). After incubation for 5 min at 37°C, the suspensions were filtered through a 0.45-µm filter and subsequently centrifuged to remove formulated CAP in the pellet. The supernatant fluids were tested for virus infectivity. This separation could not be accomplished using formulation II and the corresponding virus-CAP formulation mixtures were tested directly for virus infectivity. In control experiments, formulations lacking CAP (*sensu* Aquatic) mixed with the respective virus preparations and PBS (0.14 M NaCl, 0.01 M phosphate pH 7.2) mixed with virus were used, respectively. Serial two-fold dilutions of the respective virus preparations were tested for HIV-1 and herpesvirus infectivity, as described above. In some experiments, seminal fluid (0.6 ml; provided by New England Immunology Associates, Cambridge, MA) or whole human heparinized blood (0.11 ml) were added to the CAP formulation (1 ml), followed by addition of virus (1 ml), in order to evaluate their effect on virus inactivation.

To determine whether or not the CAP formulations affect the integrity of HIV-1, a preparation of purified virus (strain IIB; 5 µl; 1.52×10^{10} virus particles/ml; Advanced Biotechnologies, Columbia, MD) was mixed with 45 µl of 0.14 M NaCl and 50 µl of the respective CAP formulation, each prewarmed to 37°C. After 5 min at 37°C, 400 µl of 0.14 M NaCl were added and the mixture was filtered through a 0.45-µm filter prewashed with 0.14 M NaCl, 0.01 M Tris pH 7.2, 0.02 M NaN_3 (TS). Serial 5-fold dilutions of the filtrate were tested by ELISA for the p24 antigen, as described above. In control experiments, either untreated HIV-1 IIB or virus treated with the detergent NP40 (final concentration 5 mg/ml; 5 min at 37°C) were equally diluted and tested for the p24 antigen. Similar experiments were done with CAP formulations in the presence of seminal fluid or whole human blood (proportions given above). When whole blood was added to the formulation, the diluted virus preparations were centrifuged at $2000 \times g$ for 5 min before filtration through 0.45 µm filters.

To test the effect of formulation I on distinct bacterial STD pathogens and *Lactobacilli*, respectively, equal volumes of the formulation and a suspension of bacteria (10^8 to 10^9 cells/ml in 0.14 M

NaCl) were mixed and incubated at 37°C for either 5 or 15 min. Subsequently, 50 µl of 0.43 M $\text{Na}_3\text{PO}_4 \cdot 12\text{H}_2\text{O}$ were added per 1 ml of the suspension. After 5 min at room temperature and intermittent mixing, the neutralized suspensions were serially diluted 10-fold in PBS or appropriate broth media. A 20-µl volume of each dilution was inoculated per well of a microtitre plate containing growth media or onto the appropriate agar plate and incubated under appropriate conditions to monitor bacterial growth. Included with each experiment was a positive antibiotic control to demonstrate inhibition of bacterial growth and a control without the formulation or antibiotic to monitor the growth of the bacteria.

The bacterial strains, the corresponding growth media and the control antibiotics used were: *Lactobacillus crispatus*, ATCC 33820 (Lactobacillus broth; tetracycline 0.5 to 64 µg/ml); *Neisseria gonorrhoeae*, ATCC 49226 (GC media [Becton Dickinson Microbiology Systems, Sparks, MD] supplemented with 500 µl of a 2% hemoglobin stock and 10 ml of Isovitalex [Becton Dickinson Microbiology Systems] per litre of media; Ceftriaxone at 0.005 to 0.128 µg/ml); *Haemophilus ducreyi*, ATCC 33940 [Revised Ducreyi Medium (ATCC Culture Medium 1724) supplemented with 10% FBS [Life Technologies, Gaithersburg, MD] and 1% Isovitalex; Tetracycline 0.125 to 64 µg/ml]; and *Trichomonas vaginalis*, ATCC 30092 (Modified Fuji media;³⁷ metronidazole 1 to 128 µg/ml).

The guidelines established by the Environmental Protection Agency³⁸ were followed to study the effect of formulation I on *Chlamydia trachomatis* (strain LGV type III; ATCC VR-903). After incubation with the formulation and neutralization, the preparation was diluted in DMEM growth media containing 3.6 mM L-glutamine, 45 µg/ml gentamicin and 8.9% FBS, and serial 10-fold dilutions were prepared. The dilutions were added to McCoy cell monolayers (ATCC CRL 1696) and the infection was determined by microscopic observation of epe, or by staining of inclusion or elementary bodies by iodine staining after 7 days incubation at 37°C with 5% CO_2 .

Results

Screening of "inactive" pharmaceutical excipients for anti-HIV-1 activity

Pharmaceutical excipients,³⁶ except compounds insoluble in water, detergents and oxidizing agents, were screened for anti-HIV-1 activity by an assay

Table 1. Pharmaceutical excipients tested for anti-HIV-1 activity

Inhibition of HIV-1 Infection	Cellulose acetate phthalate		Hydroxypropyl methylcellulose phthalate	
	ED ₅₀ * ± SD (µg/ml)	ED ₉₀ * ± SD (µg/ml)	ED ₅₀ * ± SD (µg/ml)	ED ₉₀ * ± SD (µg/ml)
p24 Production	2.54 ± 0.16	4.76 ± 1.05	4.76 ± 1.20	8.86 ± 1.11
cpe	3.68 ± 0.74	7.62 ± 1.66	7.79 ± 1.30	15.62 ± 7.61
Cell Fusion	51.91 ± 1.32	94.89 ± 3.12	68.30 ± 11.48	157.32 ± 32.86

*ED₅₀₍₉₀₎ = Effective dose(s) for 50% (90%) inhibition of HIV-1 mediated p24 production, cpe and cell fusion.

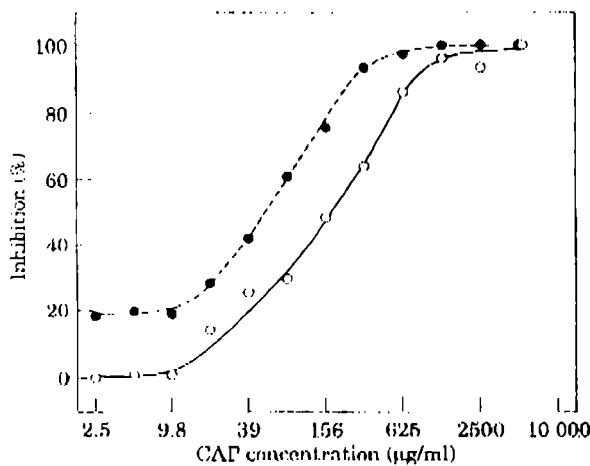


Figure 1. Inhibitory effect of CAP on infection of cells by HSV-1 (●) and HSV 2 (○). Virus preparations were tested for infectivity using a readout system based on quantitation of β -galactosidase (absorbance at 410 nm).

measuring fusion between infected and uninfected cells. Only two compounds, cellulose acetate phthalate (CAP) and hydroxypropyl methylcellulose phthalate (HPMCP), had inhibitory activity. Another polymeric phthalate, vinyl acetate phthalate, had no inhibitory activity. Other cellulose derivatives, for example, carboxymethylcellulose, also lacked activity. The two selected compounds, CAP and HPMCP, also inhibited HIV-1 infection, as measured by inhibition of cpe and of production of the HIV-1 nucleocapsid antigen p24 (Table 1). The two compounds were not toxic for uninfected cells at concentrations $\leq 2500 \mu\text{g/ml}$. Since the anti-HIV-1 activity of CAP was better than that of HPMCP, the first compound was selected for further studies.

Since herpesviruses are also frequently transmitted sexually, it was of interest to determine whether CAP might also inhibit infection by these viruses. Herpesvirus type 1 (HSV-1) and type 2 (HSV-2) were

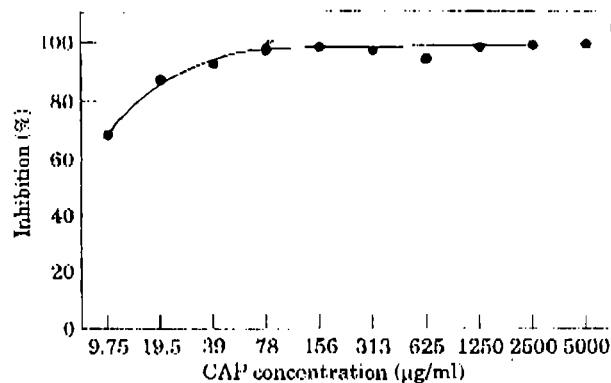


Figure 2. Inhibitory effect of CAP on infection of cells by HCMV. HCMV production was measured using a readout system based on quantitation of β -galactosidase (absorbance at 410 nm).

selected to test this possibility. Results summarized in Figure 1 indicate that CAP inhibited infection by both HSV-1 and HSV-2. Similarly, CAP inhibited infection by HCMV (Fig. 2).

Virucidal activity of CAP formulations

Mixing formulations I or II with an equal volume of a suspension of infectious HIV-1 for 5 min at 37°C resulted in inactivation of the virus (Fig. 3). Using purified HIV-1, it was possible to show that this treatment resulted in disintegration of HIV-1 particles measurable by the release of the nucleocapsid antigen p24 (Fig. 4). The CAP formulation was as effective as the detergent NP40 in releasing the nucleocapsid antigen from virus particles. Similar results were obtained when seminal fluid or whole blood were added to the HIV-CAP formulation mixtures (Fig. 5).

The formulations also inactivated the infectivity of HSV-1 and HSV-2 (Fig. 6). Similar results were obtained using HCMV (Fig. 7). Addition of seminal fluid or whole blood to the CAP formulation

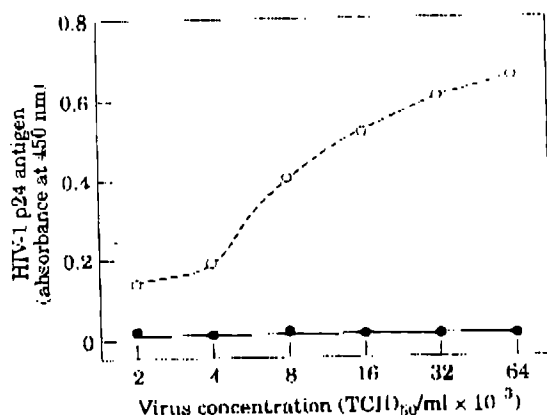


Figure 3. Inactivation of HIV-1 infectivity by treatment with CAP formulation I for 5 min at 37°C, as measured by production of the p24 nucleocapsid antigen in cells exposed to original infectious virus (positive control) (○) and virus treated with CAP formulation I (●). Similar results were obtained with formulation II (data not shown).

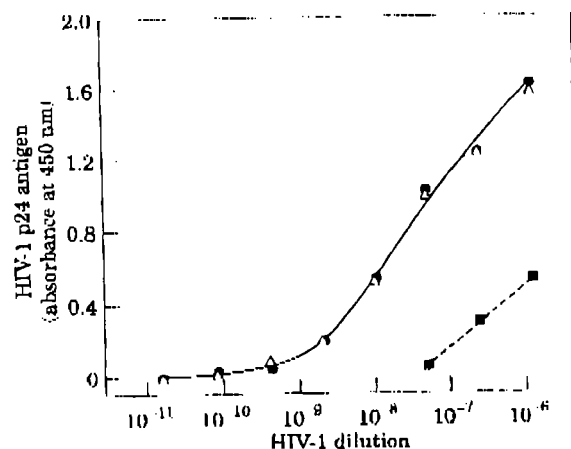


Figure 4. Disintegration of purified HIV-1 by treatment with CAP formulation I for 5 min at 37°C, as measured by the release from virus particles of the nucleocapsid antigen p24. Serial dilutions of untreated (■) and CAP formulation I-treated HIV-1 (△) were tested for p24 by ELISA. As a positive control, HIV-1 treated with the detergent NP40 was also tested (●). The results obtained with CAP formulation I and NP40 were identical and indicated a ~100-fold increase of released p24 antigen, as compared to background levels corresponding to untreated virus. Similar results were obtained with formulation II (data not shown).

did not interfere with its virus-inactivating properties under the conditions used (data not shown), indicating that the microbicidal potential of CAP

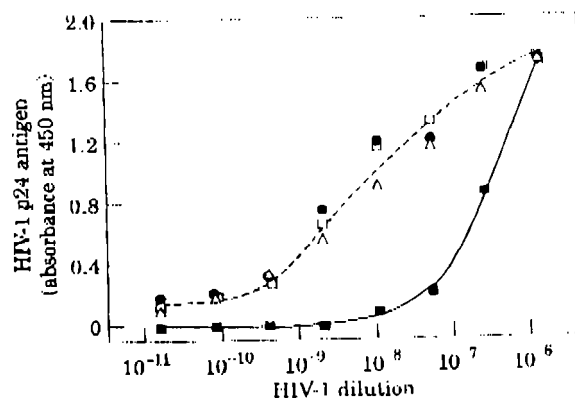


Figure 5. Disintegration of purified HIV-1 by treatment with CAP formulation I for 5 min at 37°C in the presence of seminal fluid (●) and whole blood (△) respectively. For further details, see legend to Figure 4. Similar results were obtained with formulation II, (■), untreated HIV-1; (□), NP40-treated HIV-1.

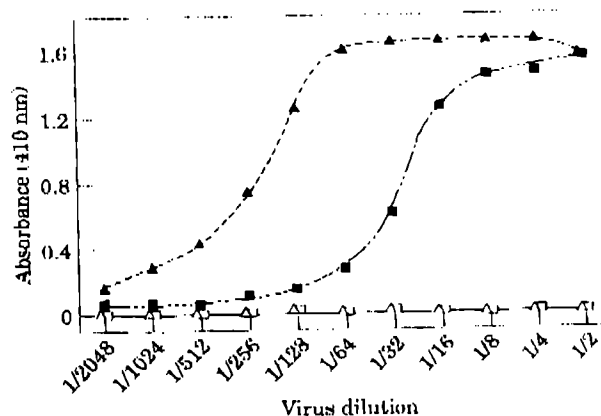


Figure 6. Inactivation of HSV-1 and HSV-2 by CAP formulation I. Virus preparations were mixed 1:1 with CAP formulation I for 5 min at 37°C. Serial dilutions of the virus preparations were tested for infectivity using a readout system based on quantitation of β -galactosidase (absorbance at 410 nm). Similar results were obtained with formulation II (data not shown). (■), control HSV-1; (□), treated HSV-1; (▲), control HSV-2; (△), treated HSV-2.

will be maintained under analogous conditions *in vivo*.

Bactericidal activity of formulated CAP

CAP formulation I was tested for its inactivating effect on the sexually transmitted pathogen *Chlamydia trachomatis*, *Trichomonas vaginalis*, *Neisseria gonorrhoeae*, *Haemophilus ducreyi* and on *Lactobacillus crispatus*. Results shown in Table indicate that all bacteria, except *Lactobacillus*

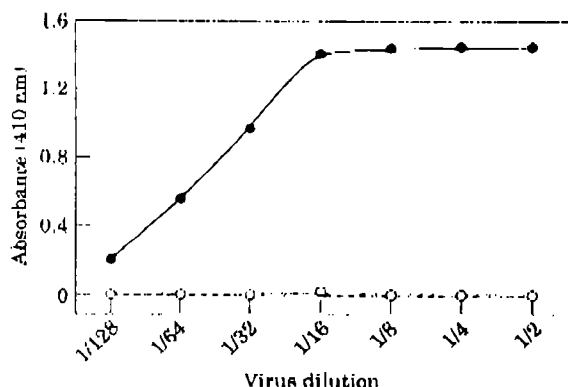


Figure 7. Inactivation of CMV by CAP formulation I. Virus preparations were mixed 1:1 with CAP formulation I for 5 min at 37°C. Serial dilutions of the virus preparations were tested for infectivity using a readout system based on quantitation of β -galactosidase (absorbance at 410 nm). Similar results were obtained with formulation II (data not shown). (●), control CMV; (○), treated CMV.

crispatus, lost the capacity to replicate after exposure to the CAP formulation. The activity of the formulation against *Treponema pallidum* was not tested because of the unavailability of appropriate *in vitro* assays. Thus, the formulation was active against 4 major non-viral STD pathogens but did not affect *Lactobacilli*, an essential component of the normal vaginal flora.

Discussion

The HIV pandemic is sustained and progressing predominantly due to sexual transmission of the virus³⁹ facilitated by prior infection with other STD pathogens.⁴⁰ Treatment of STDs (other than HIV) was found to be a feasible and economically justifiable approach to decreasing the rate of HIV-1 transmission.^{41,42} However, this beneficial approach is not sufficient to control the spread of STDs, including HIV-1. In the absence of prophylactic vaccines against STD pathogens and HIV in the foreseeable future and of safe anti-HIV-1 drugs affordable in developing countries, other simple methods to control the sexual transmission of STDs and HIV-1 must be applied. This includes mechanical (condoms) and chemical barrier methods and their combinations. Formulation of spermicides shown *in vitro* to inactivate STD pathogens¹⁶⁻¹⁹ have been considered for this purpose, but based on the outcome of clinical safety and efficacy trials,²⁰⁻²³ their utility remains in doubt. Considering the urgency in controlling the HIV epidemic, the rapid development of other microbicidal formulations is

needed. The introduction of such microbicide formulations into practice would be significantly enhanced by using active ingredients with an already established safety record for human use. To search for such compounds, criteria distinct from those applied to screening for anti-HIV-1 drugs have to be used, raising the possibility that promising microbicides with anti-HIV-1 activity may have been missed during extensive screening for therapeutic anti-HIV-1 compounds. The criteria for selection of anti-HIV-1 microbicides, as compared with those for therapeutic anti-HIV drugs, can be summarized as follows: (1) undesirability of systemic spread leading to preferred consideration of high molecular weight compounds ($M_w \leq 2$ kDa) active selectively at the site of application; (2) high degree of safety and lack of side effects (due to repeated use by healthy people as compared with the use of therapeutic anti-HIV-1 drugs by already infected individuals), the safety being augmented by the lack of systemic spread; (3) consideration of compounds with lower specific antiviral activity which can be compensated for by higher concentrations of the compounds with established safety; (4) activity directed to early steps in infection and, preferably, direct pathogen inactivation, as implied by the term "microbicide"; and (5) abundant source and low cost.

Compounds meeting at least some of these criteria are: (1) sulfated polysaccharides⁴³⁻⁴⁶ and other sulfonated polymers⁴⁷ (however, the virucidal and bactericidal activity of these compounds has not been established and their activity is ascribed to their ability to interact with target cells to inhibit virus entry^{47,48}); and (2) protegrins which have broad spectrum activity against bacteria and enveloped viruses,⁴⁹⁻⁵¹ but also have undesirable activity against *Lactobacilli* and their application may have economical disadvantages, as compared with that of sulfated polymers or CAP.

To search for a microbicide(s) meeting the criteria listed above, "inactive" pharmaceutical excipients³⁶ were first screened for antiviral activity against HIV-1, the primary STD target of interest. Of the compounds tested, only two had anti-HIV-1 activity, CAP and IPMCP. CAP, because of its more potent anti-HIV-1 activity, was selected for further studies and development. CAP is commonly used as an enteric film coating material or as a matrix binder for tablets and capsules. Its safety has been extensively studied and it has been shown to be free of adverse effects. Vaginal irritation tests in the rabbit model further confirmed its safety

Table 2. Antibacterial activity of formulated CAP

Dilution	<i>Trichomonas vaginalis</i>			<i>Neisseria gonorrhoeae</i>			<i>Haemophilus ducreyi</i>			<i>Lactobacillus crispatus</i>			<i>Chlamydia trachomatis</i>	
	Growth Control	5-min Exposure	15-min Exposure	Growth Control	5-min Exposure	15-min Exposure	Growth Control	5-min Exposure	15-min Exposure	Growth Control	5-min Exposure	15-min Exposure	Growth Control	10-min Exposure
10 ⁰	nd	nd	nd	+	0	0	+	-	0	5+	5+	5+		
10 ⁻¹	+	0	0	-	0	0	+	+	0	5-	5+	5-	4+	0
10 ⁻²	+	0	0	+	0	0	-	+	0	5+	5+	3+	4+	0
10 ⁻³	+	0	0	+	0	0	+	+	0	3+	4+	2+	4+	0
10 ⁻⁴	+	0	0	+	0	0	+	+	0	2+	3+	2+	4+	0
10 ⁻⁵	+	0	0	+	0	0	+	+	0	2+	3+	1+	0	0
10 ⁻⁶	0	0	0	0	0	0	+	+	0	2-	1+	1-	0	0
10 ⁻⁷	0	0	0	0	0	0	+	+	0	0	1-	0	0	0

nd=not done.

"0"=No growth.

"+"=Growth.

"+, -"=Slight Growth.

"1+"=Trace growth.

"2+"=Light growth.

"3+"=Moderate growth.

"4+"=Moderately Dense Growth.

"5+"=Dense Growth.

(unpublished data). CAP is a high molecular weight compound ($M_w \sim 60\,000$), indicating that if topically applied, it will not spread systemically. The likelihood of CAP spread beyond the site of application has been further decreased by using it not in a soluble but in a micronized form in the final formulations developed.

To explore the possibility that CAP might be active against other STD pathogens, its activity against HSV-1 and HSV-2 was measured and the compound was found to be active against both viruses. Further extensive effort was devoted to the design of optimal CAP formulations (data to be published elsewhere) and selected formulations were then tested for their effect on HIV, herpesviruses and other STD pathogens. The results of these tests indicated that the formulation inactivates HIV-1, several herpesviruses, including HSV-2, and *Chlamydia trachomatis*, *Neisseria gonorrhoeae*, *Haemophilus ducreyi* and *Trichomonas vaginalis*. On the other hand, the formulation did not appear to affect the viability of *Lactobacilli* which are essential components of the natural vaginal flora important for resistance against some STD pathogens.⁵² Preliminary results indicated that the formulation did not affect the infectivity of papillomaviruses (M.K. Howett, personal communication), another STD pathogen, involved in cervical cancer.^{53, 54} Further studies would be required to define the mechanism of action of CAP against these distinct pathogens. The hydrophobic nature of the phthalate residues on the CAP polymer is probably essential for this activity since many other cellulose derivatives tested lacked both anti-HIV-1 and anti-herpesvirus activity.

In conclusion, the screening of "inactive" pharmaceutical excipients for anti-HIV-1 activity ultimately resulted in the development of microbicide formulations with broad activity against distinct STD pathogens. The formulations are now being evaluated for efficacy in the SIV/monkey and HIV-2/mouse models for prevention of vaginal infection and should be considered for efficacy trials in humans.

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lations; and J. Pack for preparing the graphs and the manuscript.

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MSC.
Uttu

July 26, 1999

Eliaby Kamajibindu
C/O Mazuba Investment
PO Box 510378
Chipata, Zambia

Dear Mr. Kamajibindu:

Thank you for your letter dated June 21, 1999. During my recent travels in sub-Saharan Africa, including Zambia, I had the chance to witness first hand the need for well-trained medical professionals. I commend you for your interest in and determination to provide medical care to your fellow citizens.

Unfortunately, the Office of National AIDS Policy cannot offer direct financial assistance or sponsorships to individuals. I understand the high cost of education and encourage you to pursue other funding sources. You might investigate financial aid options local businesses, churches, or foundations may offer.

It is my sincere hope that the advocacy I do in Washington, D.C. and around the world will lead to greater awareness of HIV/AIDS, increased research, and more funding for important work like yours. I wish you the best of luck in attaining the funding you need to attend school in Tanzania and thank you for your commitment to providing care for the many in need in Zambia.

Sincerely,

-S-
Sandra L. Thurman
Director
Office of National AIDS Policy

\\NEWOPD\PNA\Corr\Letters to Africa\Kamajibindu.doc

C/O, Mazuba Investment
P. O. BOX 510378
CHIPATA, ZAMBIA

21st June, 1999.

ATT: Sandra L. Thurman
The Director
Office of National AIDS Policy
The White House,
Washington, U. S. A.

Dear Madam,

REF: INSTITUTION SPONSORSHIP.

I thank you very much for your mail 19th May 1999.

I am humbly asking for your sponsorship in view that our medical Director Dr Osorio A. of Mwambi Mission Hospital has written to you a letter of recommendation seeking institution help for the 2 years study in Tanzania in the faculty of medicine and surgery.

Could you kindly consider this request by our medical Director Dr Osorio A. This Hospital is always under staffed and your assistance will highly be appreciated. This course is well designed to take up both medical and surgical operation and very suitable for this hospital.

We look forward to your kindest help. And thank you in advance.

Yours faithfully,



Eliaby Kamajibindu.



Kilimanjaro Christian Medical Centre

An institution of the Good Samaritan Foundation

All correspondences should be
Addressed to the Director.

A.M.O. SCHOOL

P. O. Box 3010, Moshi, Tanzania
Telephone 255-55-54377 / 83
Fax: 255-55-54381
Email: JHUNTER@MAF.ORG

25-02-99

Your Ref:

Our Ref: SAMO/T.6

Eliaby B. Kaurajibindu
Mwami Hospital...
Private Bag 5...
CH.P.A.T.A. - ZAMBIA

RE: ASSISTANT MEDICAL OFFICER COURSE

Your letter dated ...08-02-99... concerning the above
subject refers.

The next intake for the AMO course will be October, 1999.
The duration of the course is two academic years.

The following is the breakdown of the fees which a student
is expected to meet if accepted:-

		<u>1st year</u>	<u>2nd year</u>
1. Accommodation	US\$	660	660
2. Tuition fees	US\$	1800	1800
3. Examinations	US\$	150	150
4. Registration	US\$	50	-
5. Caution money	US\$	20	-
6. Field work/research	US\$	-	285
7. Certificate	US\$	-	20
Total	US\$	2680	3515
		=====	=====

Please note that living expenses is not included in the
breakdown and is the responsibility of the individual student
with his/her sponsor.

All the moneys are paid in US dollars or any convertible
foreign currency.

The sponsor can pay all the fees at once, thus 6195 US\$ covering the first and the second year, or otherwise pay the exact stipulated annual fees which should be confirmed by the school authority before the student starts/continues with his/her study.

I hope the information is enough to enable you look for a sponsor for the course.

Please do not hesitate to be in touch with us again for further information you may need.

With best personal regards.



Dr. E.J. Masenga,
PRINCIPAL,
A.M.O. SCHOOL

EJM/smp

- N.B: - We need to have your full CV.
- Confirm to us of your sponsor for the course.
 - Deadline for sponsorship confirmation is June '99.

MWAMI ADVENTIST HOSPITAL

PRIVATE BAG 5, CHIPATA . ZAMBIA. AFRICA

TELEPHONE: (062) 21080 FAX: (062) 21080



21/05/99

LETTER OF RECOMMENDATION

RE: ELIABY KAMAJIBINDU 40YRS

TO WHOM IT MAY CONCERN:

This is to recommend the above mentioned name for upgrading for any courses he decides to be trained for.

He worked in our institution from Sept. 1992 to Sept. 1998 as Senior Clinical Officer. He went to Japan for 7 months training of Community Health Services and Epidemiology March 1996 to Sept. 30, 1996.

No letter or record of misdemeanor in his file and he has been a great help and assistance to the work at Mwami Hospital. His contribution to Mwami can not be fully measured but it will always be remembered.

Any assistance or help given to him would be greatly appreciated by us and him

Yours Faithfully,

A handwritten signature in dark ink, appearing to read 'Abelardo I. Osorio', is written over a horizontal line.

Abelardo I. Osorio

Mwami Adventist Hospital (Medical Director)