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[Miscellaneous Memos and Correspondence 1993] [loose] [1]

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**CONGRATULATORY LETTERS
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U.S. SMALL BUSINESS ADMINISTRATION
WASHINGTON, D.C. 20416

OFFICE OF THE ADMINISTRATOR



DEC 21 1993

DEC 28 1993

Ms. Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator
The White House
Washington, DC 20500

Dear Kristine:

I can't thank you enough for taking the time to write me about the great work done by Barney, Bridget, Don, Ellen and Gary in leading our effort to greatly enhance the government's awareness of the AIDS pandemic. Each of these dedicated people absolutely earned the praise you gave them. Not only do they each do a superior job here at the SBA, but I know the countless hours they put in before and during this event were critical in making it the success it was. I am very, very proud to be a part of their team.

It also made me proud to see the significant role that Barney played in the entire Federal government's efforts before and during World AIDS Day. He is a rare gem and we are all very lucky to have him as part of our team.

If we can ever do anything to be helpful in any way, please let us know. We are dedicated to doing our part to fight this terrible disease. With every best wish to you,

Sincerely,

Erskine B. Bowles
Administrator

cc: Barney Singer
Bridget Bean
Don Kraft
Ellen Thrasher
Gary Shellehamer



MARVIN RUNYON
CHIEF EXECUTIVE OFFICER, PMG

UNITED STATES POSTAL SERVICE
475 L'ENFANT PLAZA SW
WASHINGTON DC 20260-0010



August 20, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Health and Human Services Building
Room 729H
200 Independence Avenue, S.W.
Washington, DC 20201-0001

Dear Ms. Gebbie:

I understand that Dick Wittenberg of the American Association for World Health has shared with you the Postal Service's plans to issue an AIDS Awareness stamp. We will unveil the design for the stamp at a ceremony on September 1 in Washington, D.C. and the stamp will be issued this year on World AIDS Day, December 1. As you may be aware, previous stamp issues have helped marshal resources in support of numerous efforts to improve the quality of health and defeat diseases, and we are proud to continue this tradition with the AIDS Awareness stamp. If your schedule permits, we would be honored if you could participate in the unveiling ceremony.

The ceremony will be held at 10 a.m. on September 1, 1993, in the Benjamin Franklin Room at Postal Service Headquarters, 475 L'Enfant Plaza, Washington, D.C. Azeezaly S. Jaffer of our Corporate Relations office will contact your office next week to confirm your participation.

Best regards,



The Quilt
An International
AIDS Memorial



JAN 24 1994

December 14, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Executive Office of the President
750 17th Street, NW, Suite 1060
Washington, DC 20500

Dear Ms. Gebbie,

Kristine

On behalf of The NAMES Project Foundation, I would like to thank you for your moving and thoughtful words during the World AIDS Day ceremonies in Washington, DC, on December 1. Your remarks set a tone for the day for which I can only express my deepest appreciation.

After more than a decade of federal silence, the willingness of the Clinton administration to become involved in the struggle to educate this country about HIV and AIDS is an inspiration. President Clinton's visibility on this issue has already sent a strong message to our nation that we can no longer ignore this epidemic.

With the full force of our leadership and the broad scope of our resources, we must engage the challenge of this devastating disease and address fully its complicated social, political and medical context. Our nation has always had the ability to accomplish this; and it now seems that we have the resolve.

The NAMES Project Foundation was proud of the role the AIDS Memorial Quilt played during the World AIDS Day ceremonies. While the Quilt is a compelling symbol, it is also a powerful instrument that has helped many to grieve and has taught compassion and understanding for people who have died during this epidemic.

As you know, the Foundation has recently created the National High School Quilt Program in response to the enormous threat that AIDS presents to adolescents in this country. As an educational tool in our

Gebbie
December 14, 1993
Page 2

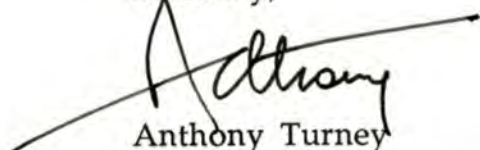
nation's high schools, the Quilt has the potential to save countless lives and prevent another generation of Americans from bearing the horrible burden of AIDS.

Please accept this photograph of the most recent display of the entire Quilt in our nation's capital, as a gesture of our appreciation. At the time, just over a year ago, the Quilt was comprised of 20,000 panels. Today, the Quilt includes almost 27,000 panels and, like the epidemic itself, its growth shows little sign of slowing.

It was a pleasure to meet you. I have enormous confidence that our government is, at last, on the right track in regard to this disease. Please do not hesitate to contact the Foundation if we can be of any help in your program to educate our country about HIV and AIDS. Again, many thanks for your efforts to end this epidemic.

Best wishes for the holiday season.

Sincerely,



Anthony Turney
Executive Director

cc Geoffrey Woolley
President, Board of Directors

Please
forward.

Mrs. Kristine Moore Gebbie
AIDS Policy Coordinator
90 Pres. Clinton
White House
1600 Pennsylvania Avenue
Washington, D.C.

WAUSAU WI 544



20:56

PM

12/03/93

29 USA

USA

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8TH DISTRICT, MARYLAND

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(301) 424-3501

Congress of the United States
House of Representatives

July 28, 1993

*Schedule
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*Trust
Donnelly*

Ms. Kristine Gebbie
AIDS Policy Coordinator
200 Independence Ave. S.W.
Room 738G
Washington, D.C. 20005

Dear Ms. Gebbie:

I enjoyed meeting you at the White House ceremony announcing your appointment as AIDS policy coordinator. I look forward to working with you to ensure more effective AIDS prevention programs and to increase our nation's commitment to fighting HIV/AIDS.

As you may know, I am the sponsor of legislation to address the urgent need for effective HIV prevention and outreach efforts for women, and to increase research on HIV/AIDS in women. I am writing to urge you to make these issues a much higher priority in our nation's AIDS policies. One immediate step in this direction would be the employment of a full-time staff person devoted solely to women and HIV/AIDS issues.

I am certain that you know the statistics: women are the fastest growing group of people with HIV, with an estimated 80,000 women between the ages of 15 and 44 currently infected. The incidence of HIV is now nearly equal among men and women in several tested populations in the United States. In fact, AIDS will be the leading cause of death in young African-American women by 1996.

Despite these facts, there is still inadequate attention given to HIV prevention programs targeted to women and adolescent girls, and insufficient research on HIV disease in women. There are few full-time advocates for women and HIV/AIDS issues in this country; the employment of such a woman in your office could be very helpful in our efforts to address the neglect of these issues.

I know that the Women and AIDS Coalition has requested a meeting with you to further discuss this matter, and I urge you to meet with their representatives. I would also be happy to meet or speak with you regarding HIV/AIDS issues at any time. Thank you for your consideration.

With best wishes,

Sincerely,

Constance A. Morella
Member of Congress

CAM:ch

Sunday, December 5, 1993

RECEIVED

FEB - 1 1994

Hour of judgment is come; time for wicked to repent

Editor, the Tribune: In the Bible in the book of Jeremiah 23-19, 20; and 30-23, 24; it says in the latter days, a whirlwind from the Lord will fall with great pain upon the head of the wicked. It says that God will not draw back this wind until the intent of his heart is performed. In Psalms 37 it says that the intent of God's heart is to root the wicked out of the earth and give it to the righteous, and Jesus taught the same thing in Matthew 13-30. In 1 Peter 4-17, it speaks of a time that "judgment" must begin at the house of God, and if the righteous scarcely be saved, where shall the sinner and ungodly appear. That is why there is so much being uncovered among the ministry; and "political," world these days. Every secret work, good or evil, is being brought out. Ecclesiastes 12-14 and 1 Timothy 5-25.

God spoke these words to me about two months ago; the hour of his judgment is come. Revelation 14-7, and on April 3, 1991, these words get the word from my mouth and warn them from me. Ezekiel 33-7. So it is time to say to the wicked in all the earth repent or God will soon move you out.

Bishop, Bill Rogers

BISHOP, BILL ROGERS
THE CHURCH OF GOD
MISSIONARY 62-NATIONS

PSALMS 9-17. THE WICKED SHALL BE TURNED IN TO ("HELL") AND ALL NATIONS,
THAT FORGET GOD: AMERICA, CHOOSE YOU THIS DAY AND ALL NATIONS WHOM YOU WILL SERVE.
POLITICAL LEADERS, AND CHURCH WORLD SET YOUR HOUSE IN ORDER.

The Mexico Ledger

Put prayer, Bible reading in schools

Editor, Ledger:

The first step to stopping crime is to restore prayer and Bible reading back into all public schools.

History speaks for itself, since prayer and Bible reading was taken out of public schools, dope and teenage pregnancy have been on the increase every year and crime among young people.

Those who holler separation of church and state are the blame for this. They have violated our Constitution; the way the Constitution reads is "Congress shall have no power to control the free exercise of Religion"; when the Supreme Court took it out they went 100 percent against the Constitution they are supposed to defend.

It is time the churches in America came together and demanded it be restored. In the schools that I attended it was read every morning and once a week a pastor was invited in to preach for one hour. Each week he would be from a different church. And if ever a single girl got pregnant during the entire time I went to school, it was unknown.

America's only hope is to turn back to God. As long as a child can not read a Bible in a public school, and pray out loud, there is no freedom of "worship." Wake up America.

Bishop W.R. "Bill" Rogers
Missionary

- 67 Nations

Thursday, December 30, 1993

- The Fulton Sun, Fulton, Mo., Saturday, December 18, 1993

The church must warn as well as preach love

We read some important prophecy in the book of Jeremiah 23:19,20, then in the book of Jeremiah 30:23,24 about a whirlwind from the Lord going forth and falling with great pain upon the head of the wicked.

In each place it makes it plain this is for the latter days, and we will consider or understand it in the latter days. It says very plainly there that God will not pull it back (this whirlwind), that He's going to send on the head of the wicked till He has performed the very intent of His heart.

When we study the entire chapter of Psalms 37, the intent of God's heart is to root the wicked out of the earth and give the earth to the righteous that they might delight themselves in abundance of peace till Jesus does come. Also, the apostle Paul said in I Timothy 3:9 that the wicked and perilous times would proceed no longer.

So there comes a time when the wicked cannot pro-

ceed any further. It is time to say to the church world that judgment has begun at the house of God.

I Peter 4:17 says, "For the time is come that judgment must begin at the house of God." Also read verse 18: "It's time to say to the political world you must repent or you will proceed no further, for we have come to the time of your folly being made manifest known of all men."

Wise men, Solomon said in Ecclesiastes 12:14, "For God shall bring every work into judgment with every secret thing whether it be good or whether it be evil." We are now living in that prophecy.

To show you it is for this age, the apostle Paul wrote in I Timothy 5:25, "Likewise, also the good works of some are manifest beforehand; and they that are otherwise cannot be hid."

God spoke plain to me a few weeks ago these words: "The hour of His judgment has come." That is in Revelation 14:7. Now we are going to see the hour of God's judgment on all who will not repent and turn wholly to the Lord.

There will be many, many in the church-world in the

very near future uncovered, and there will be a tremendous amount of political leaders who will lose their power in the very near future for we are in the hour of God's judgment.

These floods are an act of Almighty God upon the entire nation, and God will send more and more disasters and wrath until the entire nation repents. After this hour of judgment then comes the healing of the nations.

Haggi 2:7 says, "And I will shake all nations, and the desire of all nations shall come," which is peace. So beloved we are living in the hour now when every political system in all the earth in all nations is being shaken.

The next thing is healing. It is peace. Haggi 2:7 — Please look it up. We are coming to the time of Isaiah's prophecy in chapter 28 when the cover is too short and the bed is too narrow, and God is laying judgment to the line and righteousness to the plummet.

God spoke to the wise man Solomon II Chronicles 7:14: "If the people which are called by my name, shall humble themselves, and pray, and seek my face, and turn from their wicked ways, then I will hear from Heaven, and will forgive their sin, and will heal their

land."

Our nation is full of adultery and too many homosexuals and lesbians, and God will not tolerate those people but so much longer, and when you read in Romans 1:22-32 and in the book of Jude, verse 7, God Almighty is going to move in on those people.

So the hour of God's judgment is come and the nation, the entire nation now, faces the wrath of God until it repents. As it turns to God, and it will, God will heal the land and the saints of God will take over the political system.

We've reached the time of the last part of George Washington's vision to come to pass. The last thing he saw in his vision was that the nation had fallen to the bottom.

Then white angels' spirits out of Heaven came down and went into the saints of God and they arose and took over every political position on earth. Beloved that matches with prophecy in the word of God and we're approaching that hour very, very fast.

Bishop Bill Rogers is pastor of the Church of God, 201 Westminster Ave., in Fulton.



Bishop Bill Rogers

**BISHOP, BILL ROGERS
THE CHURCH OF GOD
MISSIONARY 62-NATIONS**



Patricia T. Kleiderlein,
Secretary (410) 879-6948
National Hemophilia Foundation

The Maryland NHF Chapter
P.O. Box 5028, Baltimore, MD 21220
~~(410)~~ 893-9832 or ~~(410)~~ 525-3474
(410) (410)

In December, 1992, my son was taken to Hershey Medical Center. He had fallen and hit his head. His history was written up in the HIV TREATMENT INFORMATION EXCHANGE, Vol 2 No 1 Spring Issue page 11. Dr. Ehman was the doctor in charge. Being a hemophiliac who had hit his head, he was treated with massive doses of factor 9. The reason for his falling was not treated. He had AIDS. Ten hours after being admitted to the hospital, he died. At no time during that 10 hour period was he treated for the condition that caused his fall. He was weak and unstable from an infection. Would he have lived if he had been treated? No one will ever know.

Every day that a hemophiliac seeks treatment, he is unsure as to whether he will receive adequate treatment. There is no center for the treatment of adult hemophiliacs in the state of Maryland. They must go to Washington or Hershey. These two centers are more informed on the treatment necessary for hemophiliacs with AIDS, but in my opinion these two centers are there for the clinical trials.

A Hemophilia Center for Children is in place now at Johns Hopkins with free care for those that can not pay. But services for the adults is NOT available. Promises of service in the future have been made. Will they live long enough to avail themselves of this service? This service will not be free to them. Will it then be provided or will they have to do without care and die?

Hemophiliacs with AIDS are known to live longer than others with AIDS. This means that they are unable to work longer. They must suffer longer. Money problems continue to increase. The quality of life continues to diminish. The suffering that their families endures is constantly increasing. Where is the help for these families?. These adults- who have always tried to provide for themselves and their families- who have been brought up to be productive individuals. Their insurances are capped out or near capping out. Welfare was not a word in our vocabulary. It was frowned on. Now welfare is a way of life. Give up all the possessions that you have worked hard for and then the state will take care of you.

What kind of care does one get when they are on welfare? Over the years I have seen welfare recipients made to wait for treatment because they did not have the money to pay. My son was denied a needed change in his treatment until he could prove that he had insurance to pay for that treatment. One of my other sons told Hershey Medical Center that his insurance would not go into effect until October. Two months later on September 29th, Hershey called and asked if his insurance was in effect yet. On finding out that his insurance was in effect, they said that they could then set up treatment for him.

Is this the way that a hemophiliac should be treated? There is mounting evidence that the pharmaceuticals, blood banks and the government knew the blood supply was contaminated and did nothing to adequately inform the hemophiliacs who relied on blood products to live.

Now the Ryan White Fund, which is named for a Hemophiliac with AIDS, is not providing adequate services for the hemophiliacs who are in desperate need. In order to get recognition we must become more vocal than the other groups who are out there fighting for the small amount of money that is available. Why is this necessary? What does the government intend to do for Hemophiliacs with AIDS? When are we going to have adequate free treatment for the adult Hemophiliacs with AIDS?

HANDI COLLECTS ALL MAJOR SOURCES OF INFORMATION ON THE TREATMENT OF HIV. BASED ON REQUESTS TYPICALLY RECEIVED BY HANDI AND SURVEYS OF READERS, THESE SOURCES ARE REVIEWED TO IDENTIFY THOSE ARTICLES OF GREATEST INTEREST TO *HTIE* READERS. EACH SECTION INCLUDES A COLLECTION OF ARTICLES IN THEIR ENTIRETY, AS WELL AS REFERENCES TO ADDITIONAL ARTICLES ON A PARTICULAR TREATMENT TOPIC. THOSE PERSONS INTERESTED IN RECEIVING COPIES OF REFERENCED ARTICLES MAY CALL HANDI TO RECEIVE THEM.

I. Hemophilia

AIDS ALERT, v.8 #2, FEB. 1993

Hemophiliacs Need Specialized Care, Comprehensive Management

Although they comprise one of the smallest HIV risk categories in the United States, hemophiliacs with HIV have the highest seropositivity rate of any group. Of the approximately 20,000 people with hemophilia in the country, about half are HIV positive, according to the National Hemophilia Foundation in New York.

Hemophiliacs with HIV face unique and often devastating predicaments during the course of their infection. Treatment is complicated by the fact that patients have not one, but two, serious medical conditions. For example, physicians must weigh the benefits vs. risks of invasive procedures such as biopsy or bronchoscopy in hemophiliacs with HIV, because those procedures may cause serious bleeding incidents.

Further, most hemophiliacs acquired hepatitis C virus (HCV), as well as HIV, from contaminated clotting factor concentrates before those products were routinely treated to kill HCV in 1991. (After 1985, all blood factor products were heat or chemically treated to kill HIV.) HCV carries a high mortality rate for hemophiliacs with HIV, because they are more prone to hepatic AIDS and subsequent liver failure. Likewise, hepatic AIDS complicates the course of treatment with drugs such as zidovudine (AZT, Retrovir), which can hasten liver damage.

AIDS Alert spoke with three of the nation's leading hematologists who specialize in treating hemophiliacs with HIV. They say the course of HIV is slightly different

in hemophiliacs than other risk groups, from the natural history of HIV to the types of AIDS-defining illnesses they develop. The treatment of HIV in hemophiliacs differs somewhat from other groups, too, because they often cannot tolerate the drugs used to treat HIV and opportunistic infections.

Perhaps the most significant contributing factor to mortality among hemophiliacs with HIV is not hemophilia or HIV, but liver failure caused by co-infection with HCV. M. Elaine Ester, MD, distinguished professor of medicine and chief of the division of hematology at the Pennsylvania State University College of Medicine in Hershey, found that more than half of hemophiliacs co-infected with HIV and HCV died of liver failure. She estimates that more than 90% of hemophiliacs who got clotting factor concentrates prior to 1991 (that were not yet heat or chemically treated) have HCV.

In Eyster's study of 223 hemophiliacs followed at six month to one-year intervals, 157 (70%) had hepatitis C antibodies. (1) Ninety-one (41%) were dually infected with HCV and HIV. Eleven of the 223 patients developed liver failure; eight were patients coinfecting with HCV and HIV.

Five of the patients co-infected with HCV and HIV died of liver failure, compared to none of 58 patients who were HCV positive but HIV negative. All of the co-infected patients died within 16 months of developing liver failure. When the cumulative incidence of liver failure was determined over time, 17% of co-infected patients developed liver failure after 10 years of seroconverting to HIV, and 31% had developed AIDS.

"In other words, the cumulative incidence of liver failure 10 years after HIV seroconversion was half as much as it was for AIDS," Eyster explains. "That's a pretty high figure."

Drug Therapy hastens progression

In addition, patients tended to progress to liver failure

— Please Note —

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sooner after starting drug therapy with antifungals (such as trimethoprim-sulfamethoxazole) or antivirals (zidovudine, ddI or ddC), says Eyster. The onset of liver disease occurred from four to 20 months after starting any type of drug therapy and even when the drugs were withdrawn, liver problems "persisted for many months, and in some patients, it didn't go away at all," Eyster says.

"I don't think this problem is as well recognized by the community as it should be," she says.

"We tend to think that the more drugs, the better and that combinations of drugs are better than single drugs. But in these patients, the doses definitely need to be lowered. In some instances, patients don't tolerate the drugs at all, or they will tolerate a single drug but not a combination of drugs."

Liver failure is most common in HIV/HCV hemophiliac patients older than age 30, says Eyster. In those patients, she frequently monitors the transaminase values, and if they are persistently elevated, "then I pretty much know that the patient has ongoing liver damage from the hepatitis C," she notes.

That patient is going to have a problem when I start treating him [with drugs]," Eyster adds. "So I'm very cautious in those people. I start them out with single drugs rather than combination drugs."

Unlike other patients with liver failure, it is not unusual for hemophiliacs with HIV and HCV to have only slightly elevated liver enzyme levels and be jaundiced, says Eyster. Usually, jaundice occurs when liver enzyme levels are significantly elevated. In addition, it is not unusual for liver failure to occur two to three months after starting an antiviral or antifungal drug, and it may persist for another two to three months after stopping the drugs, she says.

If a hemophiliac patient's CD4 count has dropped, and the patient has HIV and HCV and requires prophylaxis for *Pneumocystis carinii* pneumonia, Eyster says she prefers to give aerosolized pentamidine rather than the usual drug, trimethoprim-sulfamethoxazole (TMP-SMX), to prevent liver damage. She also will consider giving the patient one of the antivirals, usually in reduced dosages.

"I've found that these patients tolerate pentamidine better than Bactrim [TMP-SMX]," she explains. "I don't switch my patients over to Bactrim, because it's just another drug they have to contend with. I will think about giving them one of the antiretroviral drugs. But if they're in a situation where they have transaminase elevations that are significant and their CD4 count is low, those are the people I think about carefully before adding an antifungal agent or a second antiretroviral drug."

Eyster says she also may consider giving patients the new second-line PCP prophylaxis drug, atovaquone (Mepron), which appears to cause fewer liver problems

than TMP-SMX in patients with HIV.

She also will be participating in an upcoming pilot trial of subcutaneous alpha interferon and zidovudine in hemophiliacs with HIV and HCV who have low CD4 counts.

"We want to see if they can tolerate it," Eyster says. "If they will tolerate the combination, it may help the hepatitis C infection and HIV."

Monitor PCR, viral loads

Craig Kessler, MD, professor of medicine and hematology/oncology at The George Washington University Medical Center in Washington, DC, also has seen hemophiliac patients co-infected with HCV and HIV progress faster to liver failure. He says he monitors those patients' PCR (polymerase chain reaction) and viral load levels if they are taking one of the antivirals.

"Then [you're] able to tailor-make your dose specifically for the patient so you can depend on drug levels in order to determine how successful you are in eradicating the virus," Kessler explains.

Additionally, the antivirals—especially zidovudine—can lower platelet counts, causing bleeding in hemophiliacs. Thus he keeps close tabs on platelet counts in hemophiliac patients with HIV who are taking antivirals.

Hemophilia complicates course of HIV

Hemophilia in itself is problematic for patients with HIV, says W. Christopher Ehmann, MD, assistant professor of medicine at the Pennsylvania State University College of Medicine in Hershey.

"Obviously, their overall care is more complex, because of the presence of the bleeding disorder," he explains. "We can't do invasive testing on them without thinking it through very carefully. Biopsying livers is something we do fairly easily in a non-hemophiliac patient, but for a hemophiliac, that can cause a major bleeding event. Any invasive procedure requires [blood] factor support, so that puts constraints on [treatment]."

Hemophilia also can mask other potential HIV-related conditions. For example, Ehmann says he recently admitted a hemophiliac with HIV with mental status changes. The patient had fallen, bumped his head, and he was confused. He was automatically treated as having intracranial bleeding because of his fall. The patient died between eight and 10 hours after admission. Ehmann later determined the patient actually had sepsis, which was what had caused his fall and mental status changes. A CAT (computerized axial tomography) scan had shown some minor bleeding on the brain, which led Ehmann to believe was causing the patient's confusion.

"It took us eight to 10 hours to figure out that he was septic, and that may have been a critical period of time," Ehmann explains. "There is confusion sometimes in the

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presentation with hemophiliacs. If he had not been a hemophiliac and he had come in with those problems, I might not have been fooled for as long thinking it was a bleed-related problem."

Hemophiliacs with HIV also tend to have different opportunistic infections and other AIDS-related conditions than non-hemophiliacs. Kessler says he has rarely seen cryptosporidiosis or toxoplasmosis in his hemophiliac patients with HIV.

"I'd say the majority of our patients end up with PCP or MAC [*Mycobacterium avium* complex]," he explains.

Eyster says the hemophiliacs with HIV she sees don't have diarrheal diseases prior to developing AIDS, but like Kessler, she sees many hemophiliac patients with AIDS who have PCP or MAC.

"There are some differences in the types of AIDS-related conditions we see in hemophiliacs prior to the onset of an AIDS-defining illness, but with the classical AIDS-defining illnesses, there doesn't seem to be that much difference," she explains.

Is survival longer?

One difference among hemophiliacs with HIV compared to other risk groups is they may have longer survival times once their CD4 counts become low. Ehmann led a study on the relationship of CD4 counts to survival among hemophiliacs.⁽²⁾ In that study of 852 HIV-positive hemophiliacs whose CD4 cell counts were checked every six to 12 months, median survival rates in months by CD4 cell counts were as follows:

- at a CD4 level of 200 to 499, the median survival was 94 months or greater;
- at a CD4 level of 100 to 199, the median survival was 59 months;
- at a CD4 level of 50 to 99 months, the median survival was 38 months;
- at a CD4 level of less than 50, the median survival was 24 months.

The median survival rates in his study were higher than rates reported by others, says Ehmann. For example, a 1991 National Cancer Institute study reported a median survival rate of 12 months once patients with HIV (not hemophiliacs) reached a CD4 count of less than 50.⁽³⁾ Ehmann's study found double that survival rate in HIV-positive hemophiliacs—24 months—at a CD4 count of less than 50.

"Some of our patients remain perfectly well four, five, or even six years out from their infection, when they've reached a CD4 count of less than 50," he notes.

It's possible that survival rates are higher among the hemophiliacs Ehmann studied because they are generally infected at a younger age, and younger people with HIV tend to fare better than older people, he says. However, his study also had longer follow-up and a larger group of

patients than the NCI study, which also could account for the longer survival rates, he adds.

Refer patients to centers

The hemophiliac experts interviewed by AIDS Alert recommend that hemophiliacs with HIV be referred to one of the nation's many specialty hemophilia centers, which are located in most major U.S. cities, according to the National Hemophilia Foundation.

Most centers employ hematologists and infectious disease physicians who work together to treat HIV-infected patients. They also employ social workers and mental health professionals who can help hemophiliacs deal with the many psychosocial issues they face. For example, the average hemophiliac requires \$60,000 to \$100,000 of clotting factor concentrate a year to treat or prevent bleeding episodes, says Eyster. Couples also need counseling on safer sex to prevent transmitting HIV to their sexual partners.

"Clearly, comprehensive management of these patients is key," says Ehmann. "They are extremely complicated. You need a team approach and a lot of care for these patients."

Kessler recommends that hemophiliacs seen by physicians not affiliated with specialty hemophilia centers refer their patients to those centers once or twice a year for a consultation.

"Let the center evaluate the patient," he advises. "Most centers will be happy to send the patient back to the physician for routine care, but at least they have the expertise to take care of the hemophilia and the HIV. Most hemophilia treatment centers are so overwhelmed right now they're not going to want any new patients to follow for daily care. They would rather follow the patient, provide recommendations, and send him back to his regular physician."

[Editor's note: To find the hemophilia centers nearest you, contact (HANDI), 110 Greene St., Suite 303, New York NY 10012. Telephone: (800) 424-2634.]

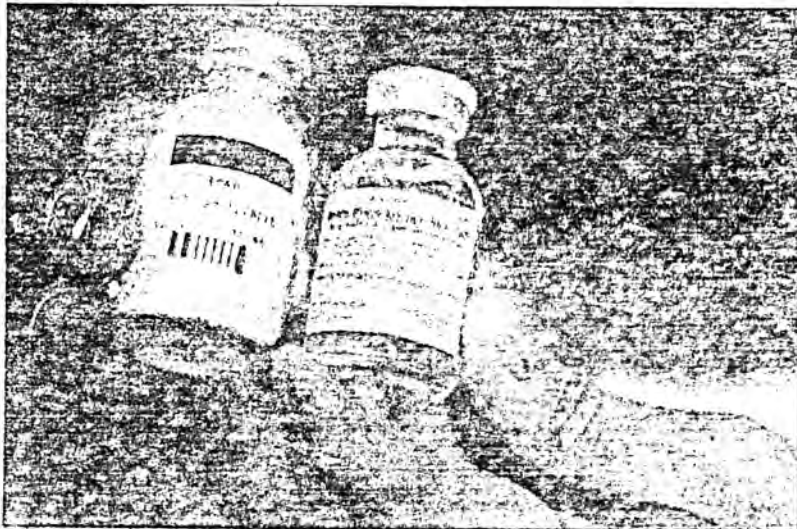
References

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2. Ehmann WC, Goedert JJ, Eyster ME. Relationship of CD4 counts and zidovudine therapy to survival in a cohort of HIV-positive hemophiliacs. Presented at the Eighth International Conference on AIDS. Amsterdam; July 19-24, 1992.
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— Please Note —

No representation, warranty, or endorsement—expressed or implied—is made as to the accuracy or completeness of this information. This information is provided as source material only and has not been independently verified by HANDI or The National Hemophilia Foundation. NHF does not recommend particular treatments for individuals. NHF recommends that you consult your physician or local treatment center before pursuing any course of treatment.

The AIDS virus haunts a generation of hemophiliacs



AMY DEPUTY/STAFF PHOTO

These bottles hold \$900 worth — one dose — of clotting factor.

By Holly Selby
Staff Writer

Jim Miller of Dundalk never envisioned himself as an activist, testifying before the city council, speaking out angrily on TV and protesting at a national conference.

Having battled hemophilia all his life, the 44-year-old father of three never dreamed he'd be fighting to survive AIDS, either.

His plight and his anger reflect a massive tragedy. About half the nation's hemophiliacs are HIV positive because the blood products prescribed for them contained the deadly virus.

For Mr. Miller, a huge burden became a crushing one. Hemophilia made his joints swollen, his movements painful. AIDS forced him to quit the job he loved, caused him to

lose 40 of his 170 pounds and makes his hand tremble slightly when he reaches to grasp yours.

And AIDS has propelled the soft-spoken, former city maintenance supervisor into the limelight. "I've chosen to come forward, and I'll tell the world," he says. "If I don't do it, who will?"

By talking about hemophilia and HIV, at first softly, then with increasing vehemence, Mr. Miller is adding his voice to a growing chorus of reluctant activists.

He is one of about 10,000 hemophiliacs nationwide who are infected with the human immunodeficiency virus because they used contaminated blood-clotting factor — the medical treatment meant to save their lives.

See **BLOOD**, 18A, Col. 1

HIV-infected hemophiliacs seek redress for treatment that proved deadly

BLOOD, from 1A

In the past few years, hemophiliacs, who historically have preferred to downplay their disorder and blend in with the mainstream, have filed lawsuits against the blood products industry, the medical profession and even the national organization that represents hemophiliacs.

They and their families are demanding better and more comprehensive health care. They are organizing networks of activists and are staging protests. And they have demanded an investigation into how tainted blood-clotting factor spread HIV among hemophiliacs.

Reparation sought

Early next month, at its annual meeting in Indianapolis, board members of the National Hemophilia Foundation hope to vote on a settlement package aimed at every HIV-infected hemophiliac — and proposed by the pharmaceutical companies that sold the contaminated blood products. The foundation, whose members hope the package will include a range of assistance from financial to health, has asked the companies to unveil their proposal by Sept. 30, says Alan Brownstein, executive director of foundation.

In July, Health and Human Services Secretary Donna E. Shalala asked the Institute of Medicine, a division of the National Academy of Sciences, to investigate the transmission of HIV among hemophiliacs during the years 1982-1984. Her request came in response to calls for an investigation from Sens. Bob Graham, D-Fla., Edward M. Kennedy, D-Mass., and Rep. Porter J. Goss, R-Fla.

But to some hemophiliacs, these measures are too meager and too late.

"We want as many hemophiliacs as are infected to bring legal action against the pharmaceutical companies, the blood banks and the doctors," says Peter Hoffman, director of the Peer Association, a 2-year-old hemophilia organization, which stages protests with the AIDS group ACT-UP. "And we want a congressional investigation because Congress has

greater subpoena power and can really scare these companies into coming forth with information."

Half are infected

It could be said that a generation of hemophiliacs is dying.

From 1979 until 1985, when the HIV antibody test was made available, about two-thirds of all hemophiliacs nationwide were infected with HIV. Since 1987, there have been no new reports of hemophiliacs contracting HIV from blood products, according to the National Hemophilia Foundation.

Today, half of the 20,000 hemophiliacs living in the United States are HIV positive. "The number is getting lower because so many have died already," says Anne King, foundation spokeswoman.

Figures for how many HIV-positive hemophiliacs live in Maryland are not available. However, there may be as many as 507 hemophiliacs infected with HIV in Maryland, Washington, D.C., and the four surrounding states, says Elizabeth Holomon, hemophilia coordinator for Maryland. Twenty-eight spouses or partners of hemophiliacs in the region also have been infected with HIV.

At a recent meeting of the Maryland chapter of the hemophilia foundation, bitterness and pain made voices raw with emotion. "We need help and we need it yesterday!" cried one mother. "My son died and my two others are dying!" said another. "We're victims!" shouted an HIV-positive man.

The irony of how HIV spread among hemophiliacs makes coping with the virus particularly hard, says Charles Robinson, an HIV-positive hemophiliac who serves on the mayor's AIDS Coordinating Council and who plans to attend the national convention in Indianapolis.

Clotting factor "changed hemophiliacs from being unable to live normally into people who could hold jobs and pay taxes," he says. "That very gift has thrown us into this abyss. It's a very difficult anger to deal with."

Hemophilia is a genetic condition that affects the blood clotting proc-



Jim Miller of Dundalk has hemophilia and AIDS. His medical costs have surpassed the lifetime cap on his insurance.

ess. The disorder is passed from generation to generation by mothers, who show no symptoms. Hemophiliacs either don't have enough clotting factor, or the factor they have doesn't work well, so they are subject to painful internal bleeding. When they feel a "bleed" starting, they inject intravenously the manufactured clotting factor to help stop it. But a single dose of clotting factor comes from the donated blood of as many as 22,000 people.

When working, Mr. Miller, a severe hemophiliac, needed as much as a dose a day. By treating himself so that he could function normally, he unwittingly exposed himself again and again to the blood of tens of thousands. Now, due to the screening test and to new ways of processing the factor with heat, blood products are free of HIV.

Medical bills skyrocket

For many families, the cost of car-

"[Clotting factor] changed hemophiliacs from being unable to live normally into people who could hold jobs and pay taxes. That very gift has thrown us into this abyss."

CHARLES ROBINSON
Mayor's AIDS Coordinating Council

ing for an HIV-positive person, in addition to treating hemophilia, is devastating. For a severe hemophiliac, treatment can run as high as \$100,000 a year. Add the expense of caring for a person with HIV or AIDS, and the amount is staggering.

As in Mr. Miller's case, HIV forces many hemophiliacs to stop working. Others quit jobs to achieve income levels low enough to qualify for medical assistance. As expenses mount, some hemophiliacs surpass the lifetime caps on their health insurance. Meanwhile, the need for medical care, and the bills, continue.

One woman who attended the Maryland chapter meeting talked later about her hemophiliac son. When he was diagnosed with AIDS, she left her job to care for him.

"I want to spend all the time I can with him. I'm living the future right now," she says. "Be it we watch TV together, be it we take a ride in the car: If I can, I give it to him now, I do things with him now."

Her 23-year-old son declined to be interviewed and asked that his mother's name not be used because he doesn't want anyone to know he has AIDS.

She will respect his privacy, she says. Then her face contorts with sorrow: "I gave him this, I gave him the factor. I didn't know it was contaminated."

The woman's marriage, strained by hemophilia, fell apart with the added pressure of AIDS. Her husband, who lives with their daughter, helps the son financially but cannot hope to pay for all the medical treatment. Gradually, the woman has sold things to keep her diminished family afloat: some family property, the piano. Now she and her son are living on a home equity loan.

She has consulted a lawyer about suing the pharmaceutical company that produced the clotting factor. But, "we're talking a lot of money [spent in litigation] and a lot of years in court and a lot of public pain. Do I want that?" she says. "If I don't get [some kind of] compensation while my son is alive it doesn't matter. I may be financially ruined but I don't give a damn; it's not for me, it's for him."

At the Miller house these days, where the family of five lives on a mix of disability and medical assistance and city pension payments, receiving monthly bills of \$15,000 is not inconceivable. Since his medical costs have gone beyond the lifetime cap, Mr. Miller's insurance pays only 50 percent of his expenses. "I just keep paying \$20 on each bill, but we are running farther and farther behind," says Mr. Miller's wife, Emma Lee Miller.

'We can't wait any longer'

The worst fear, says one Maryland parent, is that while negotiations continue and investigations get under way, the problem, in a sense, is disappearing.

"We all feel that on some level people in charge out there know that the hemophiliacs are dying," she says. And these officials "know that as time goes by [there will be fewer people] to take care of."

Mr. Miller, who plans to attend the convention in Indianapolis next month and protest if necessary, agrees that time is running out for victims of HIV contamination in blood products. "We can't wait any longer for something to be done for us. Hemophiliacs are dying — they may be dead in six months. I may be gone in six months."

LIVING WITH HIV, ONE DAY AT A TIME

Virus changes course of 3 lives

By Holly Selby
Staff Writer

The virus that causes AIDS creates havoc in the body and the spirit. But people infected with HIV still must get on with the day-to-day business of living.

Seven years after testing positive for the human immunodeficiency virus, Charles Robinson, a hemophiliac, is looking for a computer programming job.

Douglas Garriott, an architect who became infected nearly a decade ago, channels his energy into directing a local organization that renovates or builds homes for the needy.

And Gwen Green, a former model and clothing store manager who tested positive for HIV more than six years ago, juggles raising two daughters and doing volunteer counseling for a local AIDS group.

Like these three Baltimore residents, an estimated 30,400 men, women and children in Maryland are infected with the immunodeficiency virus, according to the state AIDS Commission. That's more than three times the number of Marylanders who die each year from cancer.

About half of those who test positive for HIV develop acquired immune deficiency syndrome within 10 years. Many others, however, live a decade or longer before they begin to show signs of the fatal condition. HIV itself produces symptoms so "silent" or unnoticeable that some people may be unaware for years that they are infected.

Meanwhile, those who do know must try to get on with life, like everyone else: They work, play, make love, raise children, shop, travel — and dream of the future.

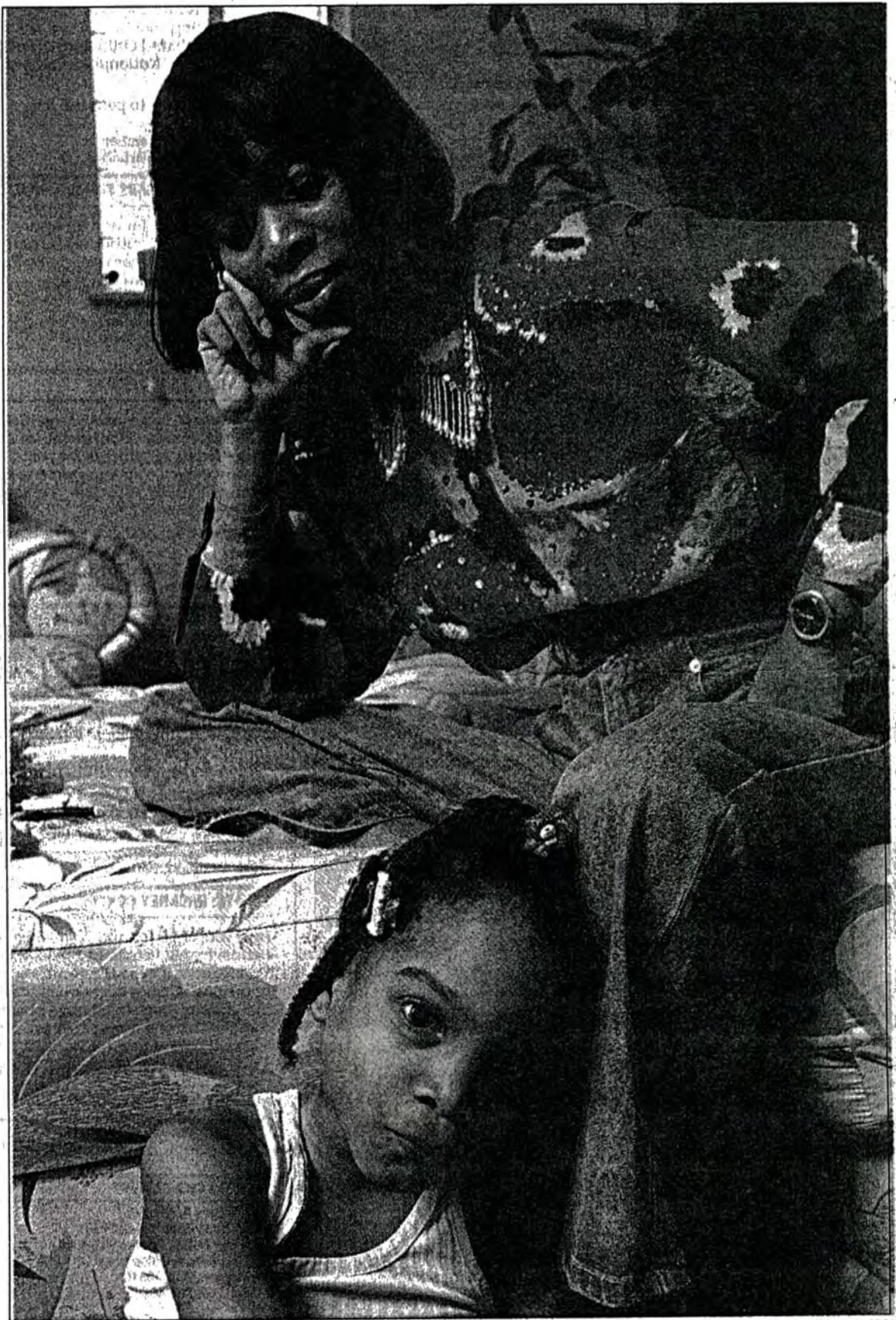
Forced restructuring

Mr. Garriott, 51, was infected with HIV in the mid-1980s. For much of the time, the virus left him alone: He ran his Silver Spring architecture business; he vacationed with his sons in San Francisco; he went with his longtime companion to the Eastern Shore.

But little by little, HIV has been stealing from him. His lover. His job. His health.

In the past four years, the number of specialized, infection-fighting

See HIV, 3B



AMY DAVIS/STAFF PHOTO

Gwen Green and daughter Rasheeda, 6, are HIV positive. Ms. Green says her biggest worry is the future of her two daughters. Her 18-year-old daughter is not infected with the virus.

THE SUN
AUGUST, 1993

From 1B

cells in Mr. Garriott's blood has dropped steadily. He's had a severe reaction to the anti-viral drug AZT, and bouts with thrush, a painful fungal infection of the mouth.

None of these symptoms means Mr. Garriott has AIDS. Still, he spends hours every week in various clinics or doctors' offices as a participant in four studies on HIV conducted by the National Institutes of Health, the University of Maryland Shock Trauma Center, the Johns Hopkins Hospital and the Chase-Brexton Clinic.

As a former U.S. Army Specialist 5 who was stationed in Vietnam for 13 months, Mr. Garriott's regular medical care comes through the Veterans' Administration Hospital here. The studies give him access to experimental medicines or treatment that might stave off the onset of AIDS, he says.

And participating makes him feel that he has control over his health care. Unlike his lover, who refused to get tested until he was quite sick, Mr. Garriott says, "I don't want to wait to know what the virus is doing. I want to know. I want all this stuff to show me what's going on."

Most of the time, though, he's tired. Fatigue, caused by HIV, has become a nearly constant companion. "Sometimes it lasts three to four weeks, sometimes days," he says.

A wiry man who favors worn blue jeans, Mr. Garriott once was married and has two sons age 24 and 26. At the time of his divorce in 1978, he told his ex-wife and children that he was gay, he says. Telling them, especially his sons, that he was HIV positive was more difficult.

"I stewed about it for a year," he says. Finally, one morning he took his youngest son, then 18, out to breakfast and blurted it out. "He was pretty upset, but I answered all his questions and told him to keep on asking questions," Mr. Garriott says.

In 1990, he closed his architecture firm in Silver Spring for reasons having to do with ethics.

His illness did not endanger colleagues in any way, but he worried about not being able to complete projects.

He asks: "Is it ethical for me to go out and solicit work that might take me two years to finish? Is it honest?"

Moreover, his lover was pressuring Mr. Garriott to join him in Baltimore.

"Maybe he thought he was getting

sick. Maybe he thought I was getting sick," Mr. Garriott says.

His lover died of AIDS last spring. They had been together since 1982.

Out of work, Mr. Garriott could no longer afford the Baltimore condo the men bought in 1985. He has moved to a federally subsidized apartment downtown.

From there he works to ensure that others in his position don't lose their homes.

He is president of Housing Unlimited Group (HUG), a coalition of medical and development professionals who try to provide housing to people with AIDS. The coalition recently signed a city contract to assess the housing needs of people with AIDS and develop a 10-year housing strategy.

"I can talk on the phone even if I don't feel well," Mr. Garriott says.

Hemophiliac's double burden

Hemophilia has given Charles Robinson a tolerance for pain, an intimate acquaintance with doctors, patience born of practice when dealing with the health care system, and an understanding that his health is something to be managed carefully.

This knowledge may be useful when applied to HIV, but it doesn't make living with it any easier.

Mr. Robinson was 8 days old when his parents discovered that he, like three of his great-uncles, was among the approximately 20,000 hemophiliacs in the United States.

He was 25 when he discovered that he is one of about 10,000 hemophiliacs infected with HIV by the very treatment meant to save their lives.

Hemophilia, a genetic condition in which the blood doesn't clot, is transmitted by the mother, who shows no symptoms. Most HIV-positive hemophiliacs were infected when they used blood-clotting products or had transfusions before 1985 — when a test for HIV made screening the blood supply possible.

In the past year, hemophiliacs increasingly have begun to question and criticize the medical industry that provided them with tainted blood products. Last spring, Sens. Edward M. Kennedy, Bob Graham and U.S. Rep. Porter J. Goss called for an investigation of how HIV was spread among hemophiliacs.

Mr. Robinson, 31, is still dealing with the knowledge that he was infected with one chronic disease while being treated for another. "I feel betrayed. I feel angry. And I just have to

"I say to myself, 'I may be that one that survives.' . . . Don't get me wrong, I don't always feel this way, but you don't have to die with this disease. Just go ahead and live."

GWEN GREEN

cope," he says.

A dark-haired man with dimples and a gold stud in one ear, Mr. Robinson lives a life of relative isolation in a rowhouse near Patterson Park. Isolation because friendships and dating are difficult for a person battling two chronic illnesses. Frankly, the Baltimore native says, "having the issues of sickness and health and life and death before me makes a lot of things seem trivial — like the newest movie or bars."

Much of the time Mr. Robinson spends in solitary pursuits. He tracks the latest information on HIV through newsletters and magazines. Books from "Getting The Most For Your Medical Dollar" to the Bible line his apartment walls. Solace comes through music — as evidenced by a growing collection of compact discs and a listening chair parked squarely in front of his stereo.

Once a month for the past five years, Mr. Robinson has attended a support group for hemophiliacs with HIV. And he has responded to several ads in a Washington-based newsletter called "Positive Personals," designed to bring HIV-positive people together.

After a few dates with women he met through the personals, Mr. Robinson is convinced that simply having one thing in common doesn't make a relationship. Besides, he says, "I don't necessarily want a person to have to be HIV positive to be comfortable with me."

Lately, Mr. Robinson has become a circumspect agitator on behalf of people with AIDS. Formerly a board member for the Maryland Chapter of the National Hemophilia Foundation, he now volunteers for the People With AIDS Coalition of Baltimore and is a member of Mayor Kurt L. Schmoke's AIDS coordinating council.

But his most pressing issue is finding a job.

Mr. Robinson has held jobs as a computer programmer. For health and stress reasons, he stopped working several years ago and is living on a trust fund left him by great aunts, who knew what it meant to have hemophilia.

His job search has been precipitated by an increasingly urgent need for health benefits. His health insurance will reach its lifetime cap this year, he says. Last year, clotting factor for his hemophilia cost \$30,000.

The pressures of searching for a job and medical insurance don't daunt him, he says. He's caring for his health and taking one day at a time. "My fear is not related to my virus. The virus is a biological fact, it's like a shoe size," he says. "I am not my disease."

New calling

Gwen Green received her test results on Nov. 29, 1991.

It was the day the life insurance company unexpectedly rejected her policy application; the day she tried to kill herself, but couldn't find anything in the house that would do the job; the day she decided to let herself live.

"I put my trust in the Lord and not in the doctor. I'm not saying throw the doctors away: The Lord says, 'Don't be no fool,'" she says.

An outspoken woman with a strong sense of humor, Ms. Green knows that she was infected with HIV long before she tested positive — long enough so that her 6-year-old daughter, Rasheeda, tests positive, too. LaShawn, her 18-year-old daughter, is negative.

About a year ago, the 40-year-old former model switched from working as a clothing store manager to working as a peer counselor for a local AIDS organization called Sisters Together And Reaching (STAR). The counseling job offered medical benefits, she says.

But the grant that funded her position ran out in April, and with it her paycheck and health insurance. Now Ms. Green and her two daughters live on unemployment and child support payments. Ms. Green is applying for state disability assistance, which would include medical assistance.

Although she isn't being paid, Ms. Green keeps up with the women she counseled through STAR. Occasionally, the city health department calls her when a woman first tests posi-

tive and is in need of a friend. No longer able to afford gas money for home visits, Ms. Green telephones her charges.

"Counseling's not what I wanted to do with my life, but it does seem like I'm good at it," she says and shrugs.

Her children's future is her biggest worry. The most immediate concern has been resolved, she says. "My mother and my sister said they would take care of them."

For a while, Ms. Green's maternal instincts worked overtime as she struggled to guard Rasheeda against everything — from colds to knee scrapes — a tall order when dealing with a child whose eyes twinkle with intelligence and mischief. "I didn't let Rasheeda play too rough, or go in the rain. But last winter, during the blizzard, I thought, 'My child has never really played in the snow.'"

Ms. Green put two pairs of everything on the little girl: mittens, pants, socks, shirts, sweaters. Then she watched as her daughter joined the neighborhood kids in a snowball fight.

Medicine time — four daily doses of AZT — became battle time as Rasheeda sensed that this was an effective way to challenge her mother. "Rasheeda would hold the medicine in her mouth for an hour," says Ms. Green. "It wore me out."

Telling friends and family about HIV, sometimes the most difficult part of coping with the virus, was dealt with in a straightforward manner. "I tell everyone," she says. "Then I let them deal with it."

Rasheeda, who shows no symptoms, also knows that she is HIV positive. "I told her what might happen if her friends knew," her mother says.

Ms. Green hasn't been involved with anyone since testing positive. "I don't want to be sexually active," she says. "I teach abstinence. A relationship is what got me in trouble in the first place."

The last time she saw Rasheeda's father was more than a year ago, in court dealing with child support issues.

Last January represented another dividing line in Ms. Green's life.

The Centers for Disease Control in Atlanta changed the definition of AIDS.

Doctors estimate that a healthy person has 1,000 specialized white cells per cubic milliliter of blood that help the immune system battle infections. But HIV gradually depletes



KIM HARTON/STAFF PHOTO

Hemophiliac Charles Robinson says, "I just have to cope."

those white cells. According to the new definition set in January, anyone with fewer than 200 of them per cubic milliliter of blood has AIDS.

Although she has no other symptoms and is gaining weight, Ms. Green — with a count of fewer than 200 of the infection-fighting "helper" cells — has AIDS.

To ward off depression, she keeps her life crammed with people and pretty things.

Photographs of her daughters adorn tables and shelves throughout her Northeast Baltimore apartment. Two albino parakeets flutter in a silvery cage in the living room. A photo of tennis star Arthur Ashe — who died of AIDS-related pneumonia — is next to her bed.

She has plenty of support: The apartment telephone rings constantly bringing messages from solicitous friends.

But even kindness can be wearing.

At church so many people want to hug her that departing after a service is difficult. And weathering the sharp, worried glances of friends or relatives can be tiring. "Even if I'm not feeling good, I tell my mother I'm feeling good," she says.

There are times at night when Gwen Green sits alone, rocking in the chair her sister gave her, looking into the velvet darkness, remembering what life was like before she learned she was HIV positive.

"Then I say to myself, 'I may be that one that survives,'" she says.

"Don't get me wrong, I don't always feel this way, but you don't have to die with this disease. Just go ahead and live."



OCT 25 1993

**Lutheran
Advocacy
Ministry in Pennsylvania**

The Rev. Russell O. Siler, Director

15 South Fourth Street • Harrisburg, Pennsylvania 17101-2202
(717) 232-9128

October 18, 1993

Ms. Kristine M. Gebbie
National AIDS Policy Coordinator
750 17th St., N.W.
Suite 1060
Washington, DC 20503

Dear Ms. Gebbie:

The Lutheran Advocacy Ministry in Pennsylvania is one of 17 state public policy offices in the Evangelical Lutheran Church in America (ELCA). We represent the Church in Pennsylvania public policy arenas.

At the top of our "Issues Agenda" this biennium is People Living with AIDS/HIV." My work in this area, limited as it has been thus far, has made it obvious (to me) that what our Commonwealth needs is a policy office or policy coordinator at the level of the Governor's office, dealing with AIDS & HIV issues.

What I am asking from you is information with regard to the philosophy, logistics, scope, and authority of your office. I am hopeful that what you can provide will be usable as a foundation for our advocacy toward the establishment of a Pennsylvania counterpart to your position and work.

If you could find some time for me, I would be delighted to come to your office. In addition if there is anything our office can do with regard to information, policies, needs, etc. in Pennsylvania, please do not hesitate to ask.

I look forward to hearing from you. Thank you for your time and attention.

Yours truly,

The Rev. Russell O. Siler, Director
Lutheran Advocacy Ministry in PA

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NOV - 2 1993

1701 16th Street, N.W. #203
Washington, D.C. 20009
(202) 483-6727
October 28, 1993

Ms. Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator
Office of National AIDS Policy
Executive Office of the President
Washington, D.C. 20500

Dear Ms. Gebbie:

I am writing to you at the suggestion of Marykay Haas and my sister, Ruth Ellen Luehr, AIDS/HIV coordinators for the Minnesota Department of Education. I am an attorney at the headquarters of the Federal Trade Commission here in Washington, D.C. and work as a litigator on cases relating to consumer fraud and deception.

I would appreciate the opportunity to meet with you to discuss a possible role in coordinating AIDS policy. As an FTC attorney, I have become the Commission's primary contact for questions concerning charity fraud, and in this role I have seen many schemes that unscrupulously manipulate AIDS-related issues and public sentiment. I would welcome the chance to coordinate enforcement actions against such schemes, or possibly to serve as a liaison between your office and the FTC.¹

More generally, I would welcome any opportunity to assist in your work as AIDS Policy Coordinator. My strengths lie in the areas of market analysis, investigation and litigation, and health law and policy. Having graduated from Harvard University with an inter-disciplinary degree in history, government, philosophy, and economics,² I traded commodities both domestically and internationally for three years before attending law school at UCLA. My legal studies focused on health law and trade regulation. Before joining the FTC in Washington, D.C., I served on the Clinton/Gore campaign as coordinator of the "Speakers Bureau" in the California Headquarters. I scheduled

¹ AIDS-related matters may confront several different divisions of the FTC. For example, besides charity-related problems, the Commission may grapple with false advertising, ineffective dietary supplements, and high prescription prices aimed at people with AIDS.

² I am an unofficial "Ole," having seen all three of my siblings spend their college years on Manitou Heights.

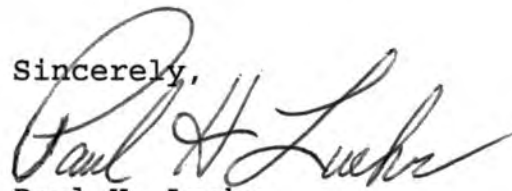
staff and volunteers for over 250 events and frequently spoke myself on health care reform.

With this background, I hope I may contribute to your mission. Please feel free to contact me at home or work. My home address and phone number are listed above. My work address and phone number are:

The Federal Trade Commission
6th and Pennsylvania Avenue, N.W., Room 238
Washington, D.C. 20009
(202) 326-2236

Thank you for your time and attention. I look forward to hearing from you soon.

Sincerely,



Paul H. Luehr

file

Rob Lankering, P.O. Box 4427
Vero Beach, Fl 32964, Aug 2, 1993

KRISTINE GEBBIE, RN, MN,
NATIONAL AIDS POLICY COORDINATOR
c/o HILLARY RODHAM CLINTON
THE WHITE HOUSE
WASHINGTON, D.C.

Subject:- Your reply to my letter was **VERY**
DISAPPOINTING!

Dear KRISTINE:

My letter was a **VERY SERIOUS OFFER** to present to you a unique **"5-HERB"**
PRODUCT that is credited with actually having changed a person's HIV-POSITIVE
condition to HIV-NEGATIVE!!!!!! Your **DISAPPOINTING** reply was:

"I (you) appreciate the continuing interest of citizens such as yourself (me) in
finding the right combination of prevention and services to respond to the
epldemic".

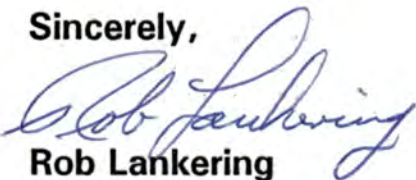
You apparently DO NOT grasp the URGENCY OF YOUR POSITION???

THIS IS A REPLY THAT I WOULD EXPECT FROM A TYPICAL
SUBSERVIENT WOMAN NURSE WHO BLINDLY FOLLOWS
THE AMA & THEIR "OWN" GESTAPO FDA POLICE FORCE!!!

IN YOUR PRESENT POSITION OF LEADERSHIP, I WAS HOPING THAT
YOU WOULD:

-BE FREE OF SUCH SUPPRESSIVE INFLUENCES!!!
-IMMEDIATELY SET UP A CONTROLLED TEST
CASE WITH A CERTIFIED HIV-POSITIVE
PATIENT, USING THE 5-HERB PRODUCT
OFFERED ABOVE!!!!!! PLEASE TAKE ACTION NOW!!!

Sincerely,


Rob Lankering

cc: Hillary Rodham Clinton

August 9, 1993

Mr. Tony DeCicco
Office of AIDS Coordination
Food and Drug Administration
Parklawn Building, Room 12-A-40
5600 Fishers Lane
Rockville, Md. 20857

Re: A COMBINATION OF FOOD ITEMS ARE ABLE TO CURE AIDS.

Dear Mr. DeCicco;

In our phone conversation of June 22, 1993, you said that Doctor Joseph Meschino, Ph.D., would do a Pilot Test using my proven cure. So far, Dr. Meschino has refused to confirm my cure because.....
"A CONTINUANCE OF AIDS INSURES THAT MONTHLY PAY-CHECK".

Enclosed find Clinical Documentation to the cure of AIDS and to Hepatitis B. The Country singer, Naomi Judd, also used my drug to cure herself of Hepatitis B. My Mother was cured of Cancer.

Today, my only income is a V.A. Pension of \$634 dollars per Month. I am a paraplegic and can no longer afford to do further research on this cure nor can I afford the new FDA Drug Approval fees. I will License my Drug to the U.S. Government and you people will have to carry my proven cure of AIDS into the final stages and approval thereof....Before the epidemic bankrupts the U.S. TREASURY.

Therefore, as suggested by the AIDS Czar, Ms. Kristine Gebbie, RN, MN, you must go to the Office of Dr. Joseph Meschino, Ph.D., at the SOLAR Building, Room 2A02 and urge him to do a Pilot Test first using the safe I.V. injection mode found in the enclosed Draft, to be followed by more extensive trials of the ONLY COMPLETE CURE OF AIDS ON EARTH TODAY....because all of your approved HIV drugs now used terminate in a sure death. Hence, you have no other choice here except to act immediately and stop this devastating disease with a Clinically proven drug. It is your Job.

Encl.

cc

Ms. Kristine Gebbie, RN, MN.

Dr. Joseph Meschino, Ph.D.

Sincerely,



Louis Strumskis
4527 Iris Drive
New Port Richey, FL 34652
(813)849-0320

THE WHITE HOUSE

WASHINGTON

July 30, 1993

Mr. Louis Strumskis
4527 Iris Drive
New Port Richey, Florida 34652

Dear Mr. Strumskis:

Thank you for writing about your discovery.

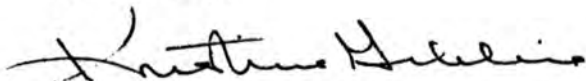
The Food and Drug Administration is responsible for the review and approval of any new pharmaceutical products, and you should contact that Agency directly at the address listed below to receive information on the product testing procedures required.

I appreciate your interest in helping stop the terrible impact of HIV infection on our society.

The address is:

Office of AIDS Coordination
Food and Drug Administration
Parklawn Building, Room 12-A-40
5600 Fishers Lane
Rockville, Maryland 20857

Sincerely,



Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

cc:
Office of AIDS Coordination, FDA

Prophecy predicted AIDS more than 70 years ago!

THE DREADED AIDS plague was predicted by a psychic over 70 years ago in one of the secret prophecies of Fatima!

The chillingly accurate prediction that a killer plague would spread like wildfire among homosexuals and would wipe out millions of them before the end of the 20th century was made by Portuguese psychic Maria Rozilia.

"Beware of the Purple Plague," she wrote in a 1915 entry in her diary.

"Beware of the body covered with purple sores. Let man who loves another beware, for a plague will wipe out this abomination from the face of the earth before the centuries turn."

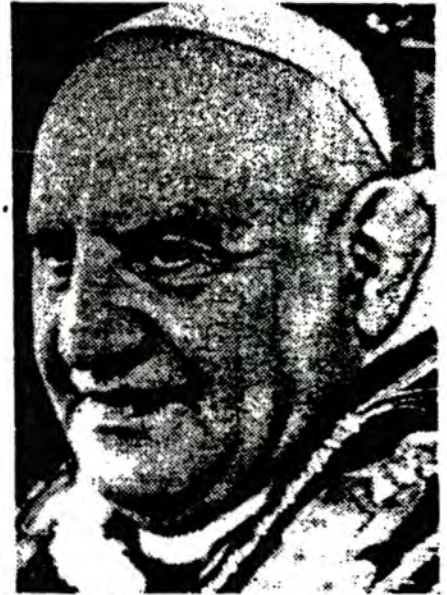
According to Dr Arthur Gaftone, the passage accurately described one of the main AIDS symptoms — Kaposi's sarcoma.

"It was an astonishing example of clairvoyance," he said.

The diary entry was uncovered by famed Albany, New York, psychic researcher Ann Fisher.

"Many people will die before a cure is found," Fisher told the EXAMINER.

"It is one of the Fatima



POPE JOHN XXIII

predictions that Pope John did not release to the world in 1960," Fisher revealed.

"It warned of a plague that would wipe out millions of people in the later part of the 1900s."

Fisher said AIDS is part of a lesson for those who die of it, but predicted a cure would be discovered and "man will move into an age of peace in the next century."



LADY OF FATIMA

Dr. Edward Douglas Powell

Forty John Street

Saint Augustine, Florida 32095

June 28, 1993

(904) 824-8773

SENT REGISTERED MAIL

William J. Clinton
President of The United States
The Whitehouse
1600 Pennsylvania Avenue
Washington D.C. 20500

NOTE THESE QUESTIONS ARE TO BE Answered
BY THE PRESIDENT WITHIN TEN
DAYS ACCORDING TO FEDERAL LAW
OF THE FREEDOM OF INFORMATION ACT

Dear Mr. President:

I request that you answer the following questions SUBMITTED TO YOU UNDER THE FREEDOM OF INFORMATION ACT, AND REQUEST THAT YOU ANSWER FROM YOUR OWN KNOWLEDGE, AND DO NOT SEEK ANSWERS FROM EXPERTS, BUT ONLY USE YOUR OWN KNOWLEDGE OR BELIEF OR TO STATE THAT YOU DO NOT KNOW THE ANSWER, OR ANY OTHER COMMENTS THAT YOU MAY WISH TO STATE. This is very important questionnaire, as the President determines many Policies concerning Immigration of persons with Aids or H.I.V. Positive Persons, as well as allowing homosexuals who have demonstrated a very high risk to be integrated into our military services with no regular plans for H.I.V Testing and no questions asked. A President who is lacking in knowledge of how Aids or H.I.V. is spread may well become the very cause of a new MAJOR EPIDEMIC of deadly Aids infecting our Military and our Country because of his decisions made during that LACK OF KNOWLEDGE!

QUESTION 1) On several Occasions when you have borrowed Sax-aphones from musicians, did you consider the RISK that the musician may have H.I.V of Aids, and that his saliva on the mouthpiece may transmit H.I.V / Aids to you? YES _____ NO _____

Presidents Comments _____

Question 2) Do you believe that a Small amount of blood in the saliva from gum disease or slightly bleeding gums from any Carrier can Transmit AIDS TO YOU? YES _____ NO _____ Comment _____

Question 3) Imagine that Jessee Jackson and four Hatians who have all tested positive for Aids are visiting CAMP DAVID when your cat SOCKS comes running into the room with Chelsea following. One of the infected Hatians grabs Socks and it immediatly scratches his arm deeply. Chelsea tries to rescue the cat from his very tight grip when the cat with the same hind claws scratches Chelsea! Question Do you believe that AIDS can be transmitted to your daughter by the scratch of a CAT's bloody claw? YES _____ No _____ Comments _____

Question 4) Al Gore is giving a walking tour of Camp David, when he stops to pick some wild blackberries and he scratches the back of his hand on the thorns. A mosquito which has just sucked blood from one of the infected Haitians landed on Al's hand next to the bleeding scratch, and before it can bite, Al Swats it, spreading the Hatians infected blood all over the bleeding scratch. Question, Can a Mosquito TRANSMIT AIDS to Our Vice President? YES _____ NO _____ Comments _____

Dr. Edward Douglas Powell

Forty John Street

Saint Augustine, Florida 32095

June 28, 1993

(904) 824-8773 SENT REGISTERED MAIL

William J. Clinton
President of The United States
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Question 5) On this same tour of Camp David Jesse Jackson goes swimming with the four infected Haitians. A LEECH sucks blood for ten minutes from one of the infected Haitians and then is brushed off by the Haitian. It immediately attaches itself to Jesse Jackson and he discovers the Leech when he comes out of the water. When Jesse pulls the leech off of his leg he squeezes the leech and forces or injects at least ten drops of the blood into his body, just as a syringe and needle would inject blood. Question? Will Jesse Jackson become infected with HIV blood and become infected with Aids? YES _____ NO _____ COMMENTS _____

Question 6) On this same tour a TICK bites one of the Haitians and sucks his blood for ten minutes. When they sit on a log for a cigarette break the tick is brushed off when only half full of blood, and like the lyme tick or rocky mountain tick it immediately attaches it self to the Marine Officer guarding them. Ten minutes later the Marine discovers the TICK , and while he is pulling off the TICK he has to squeeze the Tick and as surely as if he injected himself with a syringe and needle, he injects 3 drops of the infected blood into his body. Can a tick transmit Aids from one human being to another in this manner? YES _____ NO _____ COMMENTS _____

Question 7) On this same weekend at Camp David George Stephanopoulos has invited his friends, a Greek Diplomat, his wife and infant child. They all are undetected AIDS carriers. The Diplomat's wife has excess breast milk in the morning and uses a breast pump, and places her milk in a jar in the Camp David refrigerator. Hillary makes a gallon of her favorite expresso iced coffee for the arriving Cabinet members. The cook at Camp David, thinking the breast milk is half and half cream places it in a creamer and serves it with the iced coffee. Hillary, George, Warren Christopher and four other Cabinet members all take cream in their iced expresso coffee, and several of the other Cabinet members drink it black. Question? Will the seven who took the "cream" in their iced Coffee be exposed to the HIV Virus and AIDS? Yes _____ NO _____ Comments _____

Question 8) We know that Horse flies, deer flies are attracted to open wounds of men in battle, to human blood, feces, and other bodily fluids and we know that great Cholera epidemics were spread primarily by flies attracted to human feces and then spreading the disease to human food and water causing the spread of widespread epidemics. These particular flies also drill round holes into human beings to suck their blood. I have found absolutely no government scientific research to determine whether or not these flies can transmit Aids from one human being to another. If the President finds the same total lack of governmental scientific research on this point will he order the research to be accomplished? YES _____ NO _____ COMMENTS _____

Question 9) We know that TICKS have caused the deadly diseases of Rocky Mountain Spotted Fever and Lyme disease to human beings, but there is no scientific research for AIDS. Question, Will The President Correct this lack of research by ordering such research? YES _____ NO _____ COMMENTS _____

Question 10) We know from very primitive and ancient Medical research that Millions of People were killed by the epidemics of BUBONIC PLAGUE or Black Death was spread to humans primarily by the combination of FLEAS and Rodents. Without modern day research we know very little about how the exotic diseases from the tiny Desert FLEAS WERE STORED OR HOSTED prior to the Flea bites infected our men. These diseases are getting ever more damaging to our Military men and still no answers from scientific research. Our men are still over there. Question will our President order to aid our fighting these dises. YES ☐ NO ☐ COMMENTS _____

Question 11) We have known since Teddy Roosevelts day of medical research That Mosquitos Spread Great epidemics of Malaria, from a human carrier to a human victim. We have also known that SLEEPING SICKNESS is spread by a mosquito and Chickens or birds by injecting infected blood. HIV / AIDS is also a blood disease. Why has there never been any published Government scientific research to determine if mosquitos can transmit AIDS from one human to another? Question , Will the President Order such research to protect our Servicemen and our Country? YES ☐ NO ☐ COMMENTS _____

Question 12) If the President becomes AWARE that there are more strains of HIV virus that can spread and kill faster that exists in other Countries will he stop trying to change our present immigration laws prohibiting persons with Aids from entering our Country thus saving us from far worse epidemics than we presently face? YES ☐ NO ☐ COMMENTS _____

Question 13) Are you aware that Lesbians have no protection for even partially safe sex against Aids, Herpes or any other sexually transmitted diseases. Did you know that Herpes is also an immune cell destroying disease that will last the rest of her life, destroy her immunity and also create Heart Disease, as well as disfigure the inside of her mouth, her face near her mouth and her genitals? YES ☐ NO ☐ COMMENTS _____

(I am sending you Articles from the April 3, 1993 Science News Concerning the clear dangers from sexually transmitted Herpes which both Lesbians and Homosexual males are very prone to catch and to spread to others.)

Question 14) Should a Lesbian or male Homosexual who get Aids or disfiguring Herpes be given plastic surgery at government expense Yes ☐ NO ☐ Should these diseases obtained by their misconduct be considered grounds for a discharge in order to protect other Servicemen or women against these same diseases? YES ☐ NO ☐ COMMENTS _____

Question 15) Do you believe military men or women should remain eager and willing to save the life of a fellow serviceman or woman when they fear that mouth to mouth resusitation may result in their contracting Aids? Yes or NO ☐ Comment _____

Question 16) In order to allay the fears of getting aids from mouth to mouth resusitation should every person in combat be offered a plastic resusitation device and told how to use it to save a life in combat? YES _____ NO _____ COMMENT _____

Question 17) Every Civilian health worker is issued a rubber apron(to keep bodily fluids from his body), a nose and mouth mask (to keep saliva, a sneeze or blood products from his body) constant changes of Rubber Gloves (to keep Blood or bodily fluids away from any abraisions on his hands) and dental workers are given plastic goggles (to keep saliva, blood products or a sneeze from his tear ducts and his eyes) In Combat will you as Commander - In - Chief make sure every person who aids an injured fellow serviceman is supplied a kit containing all of these items to protect the serviceman or woman as well as our Hospital workers are protected on an everyday basis with all patients? YES _____ NO _____ COMMENTS _____

Question 18)

Male homosexuals in the priesthood of the Catholic Church have recently cost the Church over Fifty Million Dollars in Lawers fees defending against Sodomy, Fellatio and child mosestation according to a Priest on Television who has written a book on this subject, meanwhile Boyscout leaders who refuse to defend Homosexuals and child molesters have been far more successful than the Catholic Church in decreasing the trademarks of homosexuals which is clearly Sodomy, and demanding and giving of oral sex,erotic massage,and masturbation. These types of child molestations is almost certain to be performed by a homosexual, for it is their"Alternate lifestyle" Do you approve of a dishonorable discharge for any service persons who molest a child in any sexual conduct? Yes _____ No _____ Comments _____

Question 19) Many Physicians who Have discussed the number of sexual partners and sexual acts that a homosexual has had prior to his discovering that he had Aids/HIV are Astounded at the mathmatics of homosexuals. The high of homosexual seems to always be homosexual male prostitutes who earn their living from other gays and give them oral sex in their cars and less often Sodomy in their apartments or motels average ten homosexual acts per day or THREE THOUSAND SIX HUNDRED ACTS PER YEAR! Imagine the danger to every one of their customers. Homosexuals who "cruise gay bars" regularly to pick sexual partners are succesful about three times per week make 156 Homosexual acts per year. Homosexuals who "cruise Gay Health Clubs" for "GROUP PARTIES usually performed with four to six Homosexuals in a Jacuzzi or Spa in a gay health club or at their apartment with promises of Wine and Candlelight in one week, can perform 20 acts of oral sex, erotic massage and masturbation and 20 acts of Sodomy within three evenings of group Orgies. Note in the warm water before withdrawal the penis goes flaccid and very often if a condom is worn, with Sodomy it is left totally within the anus of the sexual partner. Any sex in water is highly contagious for Aids/HIV, Herpes, Syphillis and all other Sexually Transmitted Diseases and will infect any abraision or Opening, because of great amounts of seminal Fluid, Sperm as well as fecal matter in the water from Sodomy.

Mr. President, Will you allow Servicemen in Washington D. C. where a new Law Allows this, to have group sex in "health Spas", that are horrible Unhealthy, with no Questions asked when they are seen by Shore Patrol or military Police where several in the Jacuzzi are committing acts of Sodomy where Consensual sex is Approved by Washington D. C. Law as proudly stated by its Woman Mayor During the Gay Rights March recently. YES _____ NO _____ Comments _____

Question 21) Is the President aware that there may be many separate strains of HIV/AIDS from various areas of the world and that many of them may act far faster and far more dangerous than the Haitian or African varieties. What Happens when a person becomes infected with more than one strain will it create a very fast developing Strain of AIDS where this virus will create a rapidly expanding epidemic with an extremely high infectious rate. This is being studied now. I request that you do not admit immigrants with Aids until science knows more about this multiplier factor of various strains of Aids upon different D.N.A..
YES _____ NO _____

Question 22) Do you believe that if an H.I.V / AIDS Carrier loans or gives his razor after he has nicked himself to another serviceman or woman that the borrowers may become infected with Aids just as surely as an infected needle will infect a person?
yes _____ NO _____ Comments _____

I urge that you PLEASE HAVE your new Aids Coordinator Kristine Gebbie as well as Donna Shalala, Secretary of health and Human services The Following Very Important Articles : READ AND REVIEW The Evolution of Virulence By Dr. Paul W. Ewald Page 86 in Scientific AMERICAN MAGAZINE April 1993 Edition. Research by National Cancer Institute titled Herpes Decimates Immune cell Soldiers (Contributes to Heart Damage and AIDS) (Virologist Lusso Found in APRIL 3, 1993 of Science News Magazine.

MOST IMPORTANT...THAT THEY READ Two brand new textbooks by University of North Florida Professor Gerald Stine who has spent ten years of his life researching. He is very forthright in stating that Officials were misleading people to keep the masses calm, he is a well known geneticist and his very carefull research fills filecabinets with documented proof. The two books are Entitled The Acquired Immune Deficiency Syndrome : and Biological, Medical, Social and Legal Issues were Published by Prentice Hall.

I BEG THE PRESIDENT AGAINST DECISIONS ABOUT THE IMMIGRATION OF AIDS CARRIERS OR HOMOSEXUALS, LESBIANS AND BI-Sexuals in the close living and battle conditions of our military. It Could Create Epidemics of massive size where even the mouthpiece of a musical instrument, a leech, a tick, a horsefly or even the ACCIDENTAL GRABBING OF THE WRONG TOOTHBRUSH CAN INFECT A PERFECTLY HEALTHY SERVICEMAN WITH DEADLY AIDS AND OTHER SEXUALLY TRANSMITTED DISEASES SUCH AS UNCURABLE GENITAL HERPES.

Mr. President, Please Sign this FREEDOM OF INFORMATION DOCUMENT AS REQUIRED BY FEDERAL LAW.

WILLIAM J. CLINTON, PRESIDENT OF THE UNITED STATES
DATE _____

Dr. Edward D. Powell 6-28-1993

Dr. Edward Douglas Powell
Forty John Street
Saint Augustine, Florida 32095
(904) 824-8773

Professor Gerald Stine
University of North Florida
U.N.F. Administration Bld.
Jacksonville Florida

June 29, 1993

Dear Professor Stine:

Please accept my sincerest congratulations on the completion of your ten years of Research of Aids/H.I.V. and the Publication of your Textbooks in Prentiss Hall! 1) Acquired Immune Deficiency Syndrome & 2 Biological, Medical, Social and Legal Issues.

I totally agree with you that Government Officials and government Scientist have for twelve years been misleading the American and the Gay Community to "Keep the masses calm" I fully agree with you that human behavior is the key to diminishing Aids or to witness a massive epidemic.

I have just written to our President, and other officials a 5 Page Freedom of Information Act Inquiry to try to alert our Government to the fact that Aids can be spread in hundreds of ways in addition to sexual contact. The biggest LIE that these so called Government Scientist have promoted, along with the propaganda of "Gay", Lesbian and Bisexuals is that Mosquitos, Ticks, leeches, fleas, horseflies, deerflies and all other blood-sucking insects can never transmit Aids. Although there has never been any legitimate documented research by any scientist or by the United States Government this has become a key point of Lesbian and "Gay" Totally false Propaganda! What amazes me is that These organizations always cite a faceless and nameless Government Scientist and The Press and media always allows this to remain nameless. Not even a Freedom of Information Act Inquiry can pry them loose, or discover Any Government Research that even tends to prove that Blood Sucking Insects CAN NOT transmit Aids or H.I.V., for there is NO Such Published Research!

No Government Has Volunteered, and NO Life time Prisoners have volunteered to sleep bare chested in a tent with Aids and HIV carriers to prove their totally false often repeated claims that the mosquito cannot transmit Aids. We all know that Other blood diseases such as sleeping sickness and malaria are clearly transmitted by mosquitos! Why The Lies repeated over and over again WHEN THERE HAS NEVER BEEN ANY DOCUMENTED RESEARCH!

We are aware that Lyme Disease and Rocky Mountain Spotted Fever are transmitted by Ticks. Why the Lies By Government officials and Scientist, When there has never been any Documented Research?

We know that the great Bubonic Plague by fleas and rodents. Why the governmental denial now without any research that fleas can never transmit Aids. Look at the Disease From Desert Storm.

These Scientist that I can never get their names insist that no insect can ever transmit aids have never offered any proof of research! Why Should they ever be believed? My Questions to the President of the United States should prove to him that even the family cat "Socks" can cause Aids by scratching an infected Hatian with his hind claws and then scratching a family member with those same hind Claws. Thus a non infected cat can actually transmit Aids.

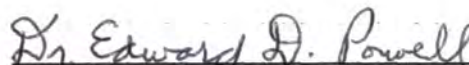
Even Human Breast milk mistakenly put in the iced coffee can infect the entire cabinet of our country. Even a scratch from a brier and a mosquitos that has not yet bitten you can transmit Aids.

There are hundreds of ways that Aids can be transmitted even from taking a dip in a Jacuzzi that has infected Seminal, Sperm and Human feces from sodomy previously performed by gays in the warm water of the Jacuzzi!

The Concept of "SAFE SEX" results from wearing condoms is a horrible lie to the American public. It isn't even safe to protect against pregnancy! Every Condom also has an open end, and when a male goes flaccid at the termination of sodomy (or oral sex) he may well leave the entire condom within the Anus or mouth of his sexual partner. This is especially true when the sex act is performed in the warm water of a Jacuzzi with all its sperm, seminal fluids and feces containing the virus. The falsly labelled "Safe Sex is never possible for Lesbians for they do not use any condoms.

I am very proud that your books on AIDS MAY SERVE TO CORRECT some of the lies and myths that have NEVER HAD ANY SCIENTIFIC RESEARCH and may become the standart of knowledge that changes the behavior of the american public and the "Gay" Communities.

I ask one Favor that may well contribute to our National Health! Please call your Publisher , Prentiss Hall and ask that they send both books to president William J. Clinton and one set to his New Aids Coordinator Kristine Gebbie. Your books may well result in changing HISTORY by changing the decisions of the president concerning the immigration Aids Patients with new strains of Aids which may well multiply the speed and killing factor of Aids when an Aids patient has a combination of different strains of Aids or a combination with Genital Herpes. I would greatly Appreciate hearing from you or receiving any information concerning my F.O.I.A. Letter to The PRESIDENT. If I can help you in any way please let me know. Our Goals are identical! I wish you every success!


Dr. Edward D. Powell

cc: The President
cc: Kristine Gebbie
cc: Al Gore et al

If this letter was
delivered January 8
then BC wasn't even
President! The White
House probably trashed
it. And quite
honestly if it was

delivered to Transition
Office we would not
have a record. Helene
needs to do a memo/
draft letter for

**PHOTOCOPY
PRESERVATION**

consideration toward
Resolution.

This is critical,
I agree.

THE WHITE HOUSE
WASHINGTON

Ray —

This letter was apparently
received at the White House
28 & hand delivery - it has
never been answered & is
causing some concern in the
community - is there any
way I might track down
whether it was ever assigned
to someone for a reply,
or what its fate might
have been?

Thanks —

Christine Gebel

Paris le 8 janvier 1993

OCT 19 1993

Luc Montagnier
INSTITUT PASTEUR
28 rue du Dr ROUX
75 015 PARIS

Mr. Clinton
President of the United States

Dear Mr President,

As one of the researchers renowned for their discoveries in AIDS, I am writing to ask for your help and support in a new worldwide action against this dreadful epidemic.

I have been concerned for some time by the long lasting dispute between NIH and my Institution, and by its negative impact on the public opinion of both of our countries.

As a gesture of good will, I met recently with Dr B. Healy, Director of NIH and her collaborators. We talked about new possibilities of international collaboration in AIDS Research. We felt strongly the need for a Manhattan-like project, as you suggested in your campaign.

I also mentioned to them the project I share with Pr F. Mayor Director General of UNESCO, to launch an International Fondation for AIDS research and prevention. The two main goals of this Foundation will be to complement the public aid in research and to help Africans.

Pr Mayor and myself consider as a great honor and support to us if you would accept to be a member of the Honorary Committee of this Foundation.

I should be glad to meet with you and your collaborators at your earliest convenience to discuss this matter.

Sincerely yours,



Pr L. Montagnier

Agency Liaison
X7486
Central Files
X2242



Suite 1200 • 1156 15th Street, N.W. • Washington, D.C. 20005
Tel (202) 223-3660 • Fax (202) 223-2164

Message conveyed
by phone
12/13
SK

FACSIMILE TRANSMISSION/COVER PAGE

TO:		FROM:	
NAME Steve Lee		NAME Diana Conconi	
COMPANY White House		RE Philadelphia Premiere	
DEPARTMENT			
FAX 632-1096			
DATE 12/13	TIME 2pm	WE ARE TRANSMITTING A TOTAL OF 3 PAGES, INCLUDING THIS COVER PAGE.	

TOM HANKS DENZEL WASHINGTON

PHILADELPHIA

December 13, 1993

Ms. Christine Gebbie
Director of AIDS Policy
17th Street, N.W.
Suite 1060
Washington, D.C. 20503

Dear Ms. Gebbie:

Every so often an important film comes along to help people see life in a slightly different way. "PHILADELPHIA" is one of those films.

It is about justice and courage. It is about humans helping humans. It is about living with AIDS.

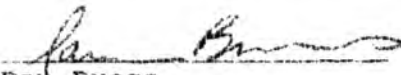
The Center for Constitutional Rights and AIDS Action Foundation are co-hosting the Washington, D.C. benefit premiere of "PHILADELPHIA" starring Tom Hanks and Denzel Washington.

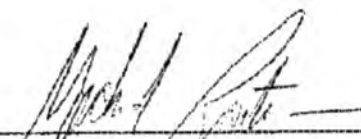
We invite you to join a select group of people being asked to lend their names as "Honorary Committee" members for this important benefit evening on Monday, January 10, 1994. The filmmakers will attend the Washington premiere screening at the K-B Cinema Theatre at 5100 Wisconsin Avenue, N.W. Following the film, we will host a reception at the Chevy Chase Metro Building at 2 Wisconsin Circle, at the corner of Wisconsin and Western Avenues (formerly Tila's restaurant).

Tickets will be \$125 for the screening and reception and \$35 for the screening only.

Due to Holiday schedules and advanced printing deadlines, we ask for a swift response by 5:00pm Tuesday, December 14th. Please call Joan Carrese or Diana Conconi at (202) 223-2608; or sign and fax a copy of the second page of this letter back to them at (202) 223-2164.

Sincerely,


Dan Bross
Executive Director
AIDS Action Foundation


Michael Ratner
Board Member
Center for Constitutional Rights

Page 2
12/13/93

[] YES! I would be happy to be listed as a member of the Honorary Committee for the January 10th Washington, D.C., Premiere of "PHILADELPHIA" to benefit AIDS Action Foundation and The Center for Constitutional Rights.

Your Signature:_____ Date:_____

Please fax immediately to: (202) 223-2164.

RECEIVED

NOV 26 1993

FRANK JORDAN is rideing a GOLDEN CHAIR-- and it is very unlikely that he will loose it. Now that some of the dust has setteled over Fox broadcastings peeping tom voyerism and KRONs Mr Lions botched soap..perhaps a few words on a vacuum " OF SENSITIVITY" mite be in order. Regardless what crooked opinion poles are saying in print.. Frank will likely get reelected no matter what. And only that counts. But if Dr Mitch Kats can snocker him into future and bigger escalated assaults on gays sex privacy..that will risk " Chair melt down and loss"

WHAT ARE THE FACTS: ????

Catholic Father Finch..like it or not..even a self styled one..operateing as a trashhey tramp Priest in the Tenderlion and 6 th street sewer..is such a " Tempting Trap and Target for " Big Muscell Govt" Its so strongly magnetic to " Judge him" and Condem Him" and NOT RESPECT HIM..if your a Dr Mitch Katz or an Art Agnos of a " Hitler Hongesto Book Burner" etc etc..and dont think for a second Father Finch is a fool. Theres a saying even in the base low criminal underworld of violent visnious uncaring hoods.." Attacking a family is the biggest sin you can committ" it could be added" or messing with there personal private bedroom life" both evoke the urge for " Murderious Retaliation Pashions.

We as America are like it or not ^{are} an experiment in combined MULTICULTURAL WITH SIMULTANEOUS MULTI RACE MIXTURE. First in History in our brand. It means that Gays may have there Bedroom be a Sex Club.. MR KATZ !! and it Means Simultan eiously Gays may have there Sex club buddies be THERE ONLY FAMILY. Andwhen you can in-a TV, & GOVT..Invadeing our/there/ us'es Family and bedroom..you were haveing very different ideas in your head..and our reality and life realitys never were sensitive to you. Add to that-that When Art Agnos shut down Fr Finch..the public herd he was called FATHER FINCH and like it or not the Public never wants Govt to publically openly destroy a Priest..even if a voter is a Methodist or a Jew. We are Alarmed and Frightened at the Ballot Box. The word LIBERAL took a death box to hell in the bodyment of AGNOS and Fura Hongesto. Gays/ Liberals will be a very long time if ever recovering from that debockel. Frank Jordan unfortunaitly is exccdingly ultra extra smart and doesnt bother to pander it ..just utilizes it as part of any good smart cop's reputawar. We like to Tease Frank about being a Nazi Fura type as being Mayor and X Cop..but privately we all rather like him and we know there are " Terriable Monster Violent Street Thugs" who will do anything to ANYONE for just the kicks and fun..like dowseing a sleeping jobless homeless with lighter fluid..4 guys and a Girl..and get off on the " Fun" . We know in this day we are glad its a Cop who is Mayor and if a X Cop as Mayor cannot " Help or Take Care of" The Vishious Bold Blooded Violent" then NO ONE CAN.

There is a severe need for a 3rd gay news paper. One that is put out by the Gay Sex Clubs and Bathhouses, of corse there is none..no Gay Bathhouses. The reason is that THE LIQUOR LIFE mob..the Gay Bars.. WANT GAYS to get there Sex Pals at the Saloon AND NOT THE GAY CLUB. The Reverse is true too. Sex Clubs (or Baths) want Gays to spend there free Cash getting there sex pals at the Glub and not the Saloon. ...(EITHER SOURCE THE AIDS RISKS ARE THE JUST SAME..SO THATS IPRELIVANT). The BAR and SENTINEL both are " Saloon Rags" and owned by Saloon Owners and Ops. So There is NO VOICE at all for REAL TRUTH for Gays..none. About 1/3 of the not strict hidden underground Gay Clubs are set up and owned by Pro Liqour Interests. They even only open up late in the eve so as to be nearly a place for the Bar Crowd to go after the saloons close at 2 am. The Real Bathhouse tyre Gays have to put up with Smelly Beer and liqour Breaths and Toxic Deathly smoke. Healthy non Bar Gays are a lost bunch. National Gay Bathhouse Chains cant and wont run in SF due to the Dr Silverman Gourt Law demanding all sex be " Witnessed and Monitored and Controlled to Govt Sex Standards of SF Health Dept Inc. (BAR-DRUNKS HAVE LOUSEY HEALTH-THE PURE BATH HOUSE FAGS WERE SUPERB HEALTH FAG'S)

The Problems related to the Mess over the Gay Sex Culture...has so many fascets and it would seem that it has little likelyhood of getting Jordan to screw him self out of his won Golden Chair..converting him into " Damaged Political Goods" as all are trying there very best to do. Frank knows its a sweet reelection to Mayor and then as a Two time Winner as Mayor on to Sacto with his GOLDEN CIAIR..and Right into THE WHITE HOUSE..doing Easily what Diaane Feinstein probably Never Can do.

Our O N L Y hope is to get to Fuck up our Bedroom Life..and or our Family or our Beloved Priest Father Finch... But as a Cop ..even a shark or alligator cop... Family and Priest and Bedroom--- "GAY" -

F A M I L Y , P R I E S T , O R B E D R O O M , are alone --

the only things that will stop Frank Jordan..and HE IS NOT DUMB.!!

PS AIDS & Big Amnt of Gay Death, Caused by Gay Liqour Press., i.,e

BAR and SENTINEL are Biggest AIDS Causers..Newspapers Cause AIDS!!

Thank you. This message brought to you by FUG. (The FAGGOTT UNDERGROUND)

Copys to: General Distribution. (BAR & SENTINEL Promote Saloons & Saloons Toxins=AIDS.

Note: 3 new Books out: AIDS INC & AIDS COVER UP & AZT THE INSIDE STCRY

e.g: AIDS Caused by Saloons. Gay Sex Innoscent. (AIDS Toxin Cuased)

Also: HIV Hcax and AIDS Ordinary Disease. "BULLSHIT FOR \$ BILLIONS"

HHS & C. E G E B B I E

NTNL AIDS OFFICE HQ

2 0 0 INDEPENDANCE AV S W

WASHINGTON DC 2 0 2 0 1



— Dec 5, 1993

Dear Mrs. Gubbie,

This note is in regard to remarks attributed to you & carried by local newspapers recently.

The tragedy of AIDS is with us for many years now & we have been made aware that the almost exclusive cause is male to male sexual contact, bisexual contact, drug addict needles & blood transfusion.

I believe that the news media has been on a very good relationship with the White House & vice versa.

This is a great opportunity for you in your present

position of influence.

Sex is a God-given gift to be enjoyed by committed, mature male + female adults, fully aware + accepting that this union may result in the conception of another child of God.

Acceptance of this fact virtually wipes out AIDS + incidentally, abortion ..

God bless you + have a happy holiday season

Sincerely,

John

THE WHITE HOUSE
WASHINGTON

file
PHOTOCOPY
PRESERVATION

July 30, 1993

8/3/93

Mr. Al Kolpien, Jr.
4421 Buena Vista, Suite 111
Dallas, Texas 75205

Blood, blud, *n.* The fluid which circulates in animals; kindred; high birth; the juice of fruits.—*a.* Pertaining to blood; of a superior breed.—*vt.* To bleed; to stain with blood; to inure to blood.

Dear Mr. Kolpien:

Thank you for writing. I am asking the National AIDS Clearinghouse to send you some current information about HIV. Since it is not a food-borne illness, mandatory testing of food service workers is not an appropriate response.

I will be carefully considering all possibilities in developing a national plan to combat this disease.

Sincerely,

Kristine Gebbie, RN, MN
National AIDS Policy Coordinator

Bleeding, external

Symptoms may include: Obvious flow of blood from an injured vessel, rapid pulse, dizziness, cold, clammy skin, thirst, restlessness and unconsciousness

Poisoning

Bodily Injury or Possible Death
Caused by a Substance Introduced into the Body through Ingestion, Inhalation, Absorption, Application or Injection

A "worst-case" scenario is extinction of the human race. I suggest you;

Respectfully,
A. J. Kolpien Jr.

If you have a question for Marilyn vos Savant, who is listed in "The Guinness Book of World Records" Hall of Fame for "Highest IQ," send it to: Ask Marilyn, PARADE, 750 Third Ave., New York, N.Y. 10017. Because of volume of mail, personal replies are not possible.



AL KOLPIEN, JR.
4421 BUENA VISTA, SUITE 111
DALLAS, TEXAS 75205

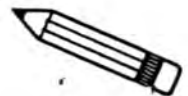


THE WHITE HOUSE
1600 PENNSYLVANIA AVENUE
(BASEMENT)
WASHINGTON, D.C.

TO: MS. GEBBIE, RN, MN

National AIDS Policy Coordinator

Alton Kolpien



(214) 521-9452



Script Writer
Mailing Lists
4421 Buena Vista, #111
Dallas, TX 75205

Scriptwriter

INSTITUTE OF MEDICINE

NATIONAL ACADEMY OF SCIENCES

2101 CONSTITUTION AVENUE WASHINGTON, D.C. 20418

DIVISION OF BIOBEHAVIORAL SCIENCES
AND MENTAL DISORDERS

TEL: (202) 334-2328
FAX: (202) 334-1385

August 2, 1993

Kristine Gebbie, R.N, M.N.
National AIDS Policy Coordinator
750 17th Street, NW
Washington, D.C. 20006

Dear Kristine:

Congratulations once again on your appointment as National AIDS Policy Coordinator!

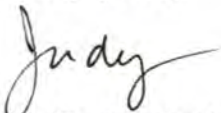
As we discussed in July, now that your appointment is official, I must ask you to provide the IOM with a letter fo resignation from the Committee on Substance Abuse and Mental Health Issues in AIDS Research. This letter should be addressed to Kenneth Shine, M.D., President,IOM, with a copy forwarded to me.

We were all very pleased that, before your resignation, you were able to join us in San Francisco for the second committee meeting. I trust that the site visit to the Center for AIDS Prevention Studies, and our observation of the Project Prevention Point needle exchange program provided some useful background to you as you formulate the agenda of your office.

Please let me know how we best may keep you informed of the committee's activities; and do feel free to call on us if we can be of any assistance to you.

Thanks again for your participation in the early stages of our study. Your contributions have been most helpful.

Sincerely yours,



Judith D. Auerbach, Ph.D.
Study Director

cc: Ken Shine, President, IOM
Keith Brodie, Committee Chair

re: "A TIME OF AIDS//THE DISCOVERY JOURNAL// CABEL TV NEW BLITZ etc et all
(The "disease" the CDC "Controls" is Gay & Liberal People & there culture..KILLS IT!).

15 November - 1993 -- Dear Friends:(of Gay Underground Newspaper Services)
NOV 18 1993 ..for what passes for free speech)

TAGU..The American Gay Underground asks you to seek to end the CDC. The Center for Disease Control in the above titled TV Propaganda campaign shows it self to be a liar and orwellian hoax maker and clockwork orange Terrorist. End the CDC by getting your congress person to do so along with the President of the USA as possible. We need to replace too the HEW and FDA and NIH and all advocates of AIDS or HIV as any reality.

CNN recently ran a News bit that SF now has a marijuana buying collective. It gets grass to AIDS sufferers. It seems that Pot has two impacts: 1. People prefer it to Liquor Life..and stop Saloons and..They change from skinney to-to fat..in other words..they Eat Food. Result: AIDS IS CURED. Thus Aids is over..and HIV bunk all the time. What about CDC s Big TV Movies?? ..

CDC & Co just CRIMINALS and in need of Justice Dept and Senate Judicial committee convicting all related personell as near REAGAN BUSH HOODLUMS. AIDS..repackaged ordinary Disease..was ALWAYS T O X I N C A U S E D.... never virus. ...and How astonishing it was indeed ..thee CDC/ AKA Religious Bigotts/ Bible Belt Homophobes showed there great skill in using the word BATHHOUSE and Photos of same and Military Police State tracing of private sex lives. How ugly too they well avoided GAY BARS and Never introduced TOXINS and even IV Drug Fans as TOXIN sufferers. and too..never included the Mass Murdering of Gays via AZT Govt Death Pill.

Those of you who have herd from TAGU before have herd the detail. And TAGU cant help you..its just a typewriter in the night and a few fags who follow the only (Med.) vessel of truth remaining in America..UCB's Dr.Prof.Peter DuesBerg and his associated lights in the 3 books now out..titles being: 1. AIDS Inc and AZT The Inside Story.. and 3.AIDS Coverup. If your a Homosexual..your only hope is that Pres Clinton will act aginest this lingering disease of Reaganbushism..the CDC-and to a degree the DEA. CDC and DEA are diseases. The Foundation of AIDS is the AIDS Foundations.. City..State..and Local in Gvnt..and Private Places like AmFar and in SF..SF General Hospital..but the pattern is nation wide. Gross? They were gonna ship 6 million doses of AZT to them 4 th world starveing Afros!!! Holicoast..to fatten Cash up the Drug Mfrs. Too as a Gay you mite hope the new FBI will burn up the CDC in the Name of fighting big time white coller crime. The FCC if revitalized mite be asked to controll future TV Orwellian blitzes like "A Time of AIDS - Discovery Journal" But.. Clinton is a "Christian Democrat"~technically a "dirty word" as Christian Democrats are required by the Bibles Leviticus chapter to "stone Gays to death" by and under the inescapable law of Christian word of God Law. So how or where are we to find the mite to defend OUR CULTURE?? and see that it is the same old REPUBLICIAN CULTURE ..as disease..that is attacking LIBERAL GAY CULTURE and managing to murder vast populations of our numbers!! Well..it may be that we will loose. CDC, DEA..AKA The USA RELIGIOUS RIGHT.. has all the power. We are 98 lb whimps assulted in the dirty dark alley by the 375 lb fag hatter..the US Religious Right..hideing behind dress of High US Govt Trust and Office.

THE SELL OUT GAYS: { note: If not stoped..CDCs AIDS Hoax will come for the life of anyone..not just liberals. YOU TOO..there nazism!!!

98% of all Gay Orgs today are in the paid employment of the Religious Right, Defect ITS THE BIG BIG M O N E Y... You can ID Them by there validateing either HIV or AIDS..its that simple.

THE MESSAGE:

(Note GAY BARS/hetro bars too) mentioned NOT as STD sources but as TOXIN Sources..Liquor & smoke as TOXIN like the IV drug it self in excess= AIDS CAUSE (AN).

The Message is we dont have yet a cure for the Cause of AIDS..ie THE US GOVTS Top trusted Agencycs. The Message is to get you to help find a way to combat them. Now..we have none. Were Defenceless. And were being killed off big time in big numbers..by a Bullshit Disease and Virus. All TRUST of American Medical Science IMMEDIATELY MUST END. We must fight to bring back our Churches and Tempels.. our lost beloved Bathhouses. We must return our use of Saloons/Liquor / and Smoke/ and Fun Drug rides..to very low levels..re-prefering instead "A HEALTHY NITE AT THE BATHS" (SEX IS GOOD) and The Bible written by old fat drunk wine soaked monks..and TOTAL BULLSHIT..Like AIDS and HIV. And remember also..too Judiasms first writings came from archaic savage primitative tribes. The CDC & CO AIDS Biz is driven by bunco religious believe systems. HIV and AIDS Fundamentalists. In time Humanity may be Liberally Liberated from the Slavery to Religion. The Power to off disease resides in each one of us. It has a million names..across aeons that have lived and great ages which have died..it is the Sacred Force Fire..the Kundalini Supreme of the GODS(Gods are many not one). But the "Force" / AKA THE FORCE..needs time to develope and study(devotion to a master) and those who are made to die to soon either had not enuff fire developement or couldnt find a sacred Fire Master..an Adept of THE FORSE. The Force thoe is always with us and the honist and true foundation of all disease elimination.

(HIV= no viral load..flunks Pathogen tests..no anti replication) WITH LOVE, Y,
Best wishes to all comrad solders in the trenches..

Thank You., Cordially., Tha American Gay Underground--

TAGU 2

notes look for Michel Kassetts TV Pgms on AIDS Hoax & See Spin Magazine back issue 1-ON DUESBERG.
BOOK: AIDS INCORPORATED/ Author: J O N R A P O P O R T
NOTES: TOXINS to make AIDS: Poluted Air or Water-Pesticides-MD Drugs

PLEASE REZEROX & FURTHER COMMUNICATE!! Thank you.

mans. 12465

TAGU



U S A I D S O F F I C E // C H R I S T E E N G E B B I
2 0 0 I N D E P E N D A N C E A V E S W
W A S H I N G T O N D C 2 0 2 0 1



NATIONAL AIDS POLICY OFFICE
OFFICE OF THE COORDINATOR

ROUTING SLIP

unanswered letter

DATE: 11/9

TO: Kristine

FROM: W. STEVE LEE

☒ For your information

☐ For your action

☐ Review and comment by (date)

☐ Prepare reply for Coordinator's signature

☐ Reply directly and blind copy Coordinator

☐ Circulate/forward to:

☐ File

COMMENTS: This letter says

absolutely nothing.

you're right! No

answer needed

MR. Joseph Curiale / MRS. Shirley Curiale.
43937 Silver Beach RD, Loon Lake, WA. 99148.

NOV - 4 - 1993.

United States District Court For The
District ~~OF~~ Alaska

MR. Joseph Curiale + MRS. Shirley Curiale,

Plaintiff(s),

VS.

Department of Public Safety Commissioner,
Richard L. Burton, Alaska State Governor,
Walter Hickel + Alaska State Trooper
Colonel, John Murphy,

} Plaintiff(s) Motion, MR.
Joseph Curiale, (pro se),
presents an Order to
the U.S. District Court
for the District of Al-
aska, to be decided
by his Honorable.
Granting Plaintiff(s)
New Amended Com-
plaint, Filed.

Defendant(s).

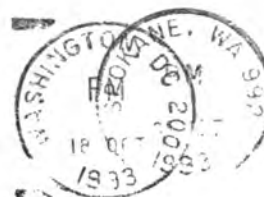
Motion

CIVIL NO. A93-218.

Plaintiff(s), pro se, Motion, that MR. Joseph Curiale,
(pro se), presents an Order to this (the) U.S. District
Court, for the District of Alaska, eventually to be
respectively decided by his Honorable, granting
Plaintiff(s) MR. + MRS. Joseph + Shirley Curiale new
formal amended complaint, disclosingly be filed.
Granting also the fact(s) proceeding in forma pauperis,
with regards also of the fact(s), contained within, honorably,
MR. + MRS. Curiale's application to proceed in forma pauperis,
supporting documentation and Order, Legally, your honor.

(page 1 of 1)
Disclosures Completed this 26th day of September, 1993, at Loon Lake, WA.
13 MR. Joseph Curiale. MR. Joseph Curiale, (pro se).

MR. & MRS. Joseph Curiale
43937 Silver Beach RD.
Loon Lake, WA. 99148
U.S.A.



Left enclosed:

Attention: MS. Gebbies.
% Coordinator, Director.
National Commission of
1730 K St. N.W.
(suite 115)
Washington, D.C.

1730 K ST NW WASHINGTON DC 20006-3466
***** AUTOMATED MAIL (MUM) *****
0630 CR 0122900E K 0611



000000

WR

June 30, 1993

CONGRATULATIONS ON YOUR APPOINTMENT.

Please Note: CANCEL, a liquid that works on the electrical system, made by physicist, Dr. Edward Sopcak, Howell, MI lab. (Now because of court injunction, he is not making this.) Has proven effective in reversing AIDS to just HIV+ in many cases, and since medicine has no cure, this should be made available again to anyone who wishes to try it.

- No side affects to humans/animals
- Lowers personal electrical charge, dissolves virus/bug
- Well person taking it would have NO SIDE EFFECT
- Used successfully in many Cancer Cases, Lupus etc.

Drug administration has the formula, has not approved it. Dr. made this and GAVE IT TO PATIENTS WHO REQUESTED IT. Drug dept should OK this--would not hurt anyone! Dr. refuses to give to pharmacy organization who would charge huge amounts. --Until medicine by chemistry (which they use) comes up with a help with no side effects, patients should have permission to choose! **HARRIET HOOPER** - More info: 313)684-5529

NUTRITION HOT LINE; P.O. Box 2245; FARMINGTON HILLS, MI 483-2245

1537 11:11:11 ←

Harriet Hooper
2876 Rockridge Place
Thousand Oaks, CA 91360



Wren Building, College of William & Mary

Christine Gebbie
THE WHITE HOUSE
Washington, D. C.

© USPS 1993



PHOTOCOPY
PRESERVATION

File

Solve,

This letter says nothing, but
Art told me all letters should
be kept for fingerprints if needed.
(Otherwise, I'd trash this)

Beast

A stylized handwritten signature, possibly reading 'Jill', written in dark ink.

DANGER: ➡

CIA:NOTE--CAUTION, NUC'S IN A SUITCASE,
OR-NUC'S SHIPPED VIA OVERSEAS UPS, INTNL.,
UPS, AND ON A-TIMMER. NO DEFENCE-ENEMY (HATE)
KNOWS TOO.

Gov Mr Pete Wilson
State Capital Bldg
Sacramento CA 95814

November 3 - 1993

RLWD
NOV 10 1993

Dear Gov Wilson...and Dear Pete:

HATE: "To have strong ILL Will for" (DICTIONARY-
AFTER WEBSTER)

I empathise and feel a deep sorrow and sadness for those unfortunate Southern Calif people of the firestorms. You said: (Gov Wilson Speaking) " I find it inconceivable that a human being could do such a thing" // said you...

Sir its a days work in an ordinary day for a member of the US Military. We let our Generals and Politicians who lead Govt go all over the world and leave towns and cities in the same state as Malibu is in and even worse..and then let them point to the American people and say" were doing it for them"

What have you been doing with your spare time?? dont you watch A&E and The Discovery Channel on Cable TV ?? They run every-weekly " War/ Military Documentaries..showing the Glorious US Military blowing up and setting afire big areas of buildings and People. Vast Fire Flames all about the place.

We had the USN sit off the Libian Coast and blew up villages..slaughtering babies and mother and old grandpas and dogs and cats..all innocent..and then had the gall to declare" we honestly cant understand why those people became terrorists" Some Americans like to think the US has a license to mass murder babies and mothers and cats and dogs with no hard feelings.

North Korea is about to sell Nuc Bombs" TO ANY BODY THAT WANTS ONE"
Pete.. you better contact them and buy a few..so you can retaliate when some hate filled nut blows one up some place in Calif perhaps. Koreans? Arabs? NOPE Pete.. the Koreans unlike some nut christians.. DO NOT FORGIVE AND FORGET -- Most Japs NEVER will forgive and forget. They wouldnt mind a dam bit if the US suddenly became plagued with " ANNOYING NUKES" (sold Cheap from the Russian Bargain Basement..and implied came those from Pakistan or N. Korea.. or secret back factory room(s) in Japan.

THE DAM DAY IS GONE:

The day is about Gone when the USA can kick ass internationally with impunity. F- 15 s and all etc wont be of any value at all soon. IT MEANS WE HAD BETTER FAST START TO GETTING PEOPLE TO LIKE US. (The alternative plan) / way.).

A Leading Sr NY Cop on TV said that in NYC crime: PEOPLE NO LONGER HAVE RESPECT FOR HUMAN LIFE" Well.. how the Hell could they Pete??? We teach Americans to be slaughterrrs and merderres ..Watch how cheap human life is ..in Gulf war..where 1 0 0 , 0 0 0 Brown Skinn Arab Grunts are high speed killed by the Glorious US Air Force and related machinery. Then..we grieve at the lost wall in America against senseless killing dailly..as we see a nut slaughter a baby and teen and etc from an apt window. And what do we get toled from TV?? were gonna build more and more prisions and more Cops !!!? CANT ANY BODY " RAISE THERE CONSCIOUSNESS" Up high enuff to realise the Enemy is H A T E -- Thats where no respect for human life came from. In SF we have 8,000 Homeless..they exist because there is in Govt NO RESPECT FOR THERE HUMAN LIFE. Hate is a Disease and Sickness..and as such is IMMUNE-to Cops and Prisions and even Gas Chambers. It cant be fought or defeated in that way. Pete you know how and why..its simply conceivable ..and you know ..it was/ is and will be.. H A T E . Is it to bitter a pill to start to get people to like us rather than hate us? The "Shot in the Arm cure" is the same as it would be for AIDS... UNDEMANDING LOVE Nationally and Intnly.

Its the same story. Thy Will be done on earth..and its been just /only HATE. UCBs Dr Prof Duesberg has overwhelming proof that HIV flunks all Pathogen tests-- and AIDS just repackaged ordinary disease..but we keep and have bullshit AIDS, because fuckin god dam Republicans Reagan and Bush HATED ..hated Liberals, and fags, and swingers, and any people, who love life enuff to raise there consciousness with a Joint to get free and LOVE LIFE. SIC and HATE and DIVISION.. that is Republican in defination of the term REPUBLICAN. and Lyndon Johnson a God Dam Democate gave us " Nom" So where are us Dam Liberals?? why were under the nearest tree smokeing a joint.. hoping you bastards lovelessly wont come for our Freedom of Speech..which is what smokeing a joint is. its RELIGION.. to " Relig..to connect. Get those North Koreans and Etc to smoke some good Pot-- and they will love and forget..rather than hate and incenerrate.

CC; The CIA / FBI/ NYC Mayor Julianne/ SF Mayor F. Jordan/ SFPD/ Sentinal Rag and-- B.A.R Fag Rag/ and Pres Clinton/ SF Chronicle Newspaper/Jesus Christ, via St Marys/ The Pope at Rome/ Soup Alioto/ MCC Church SF/ Dr. Prf.P.Duesberg/ CDC-Atlanta/ HEW/ VP Gore/ Lady Rodham Clinton/ Fmr PM Margret Thatcher/ Mr Boris Yeltsin-SF Embsy. Buddies Club SF/ CUAV SF/ DONAHUE-ABC NY/ Ms Janet Reno/ TPH-Quest Books/ Sen Boxer Mr Ray TalleoFarrow, KGO Radio SF./Senate Judiciary Committee WDC/ SF Health/ NIH-WDC. Thank you., VTF., Liberal Command Post Nr CP2-GAY Fag 7762/ XQ/ San Francisco USA

AKA: Gay Earth / Gay Underground/ Gay Lib/ Velvet Underground-- Etc Etc.

CAUTION ADVISSORY: CAPITALISM-BEING DOG-EE-DOG-IS THE MOST ANTISOCIAL SYSTEM ON EARTH, AND AS SLAVES OF CAPITAL-AND RELIGION.

YOU ARE A REAL STUPID BROAD!

MANDATE FOR CHANGE: Everybody in the Clinton administration yearns to change us. Now steps forth Bill Clinton's new AIDS czarina Kristine Gebbies, who tells us we must change America's "repressed Victorian society." Gebbies told a teen-age pregnancy conference in Washington last week that we must begin to view sex as "an essentially important and pleasurable thing" and that, unless we do, "we will continue to be a repressed Victorian society that misrepresents information, denies sexuality early, denies homosexual sexuality particularly in teens, and leaves people abandoned with no place to go." Was the czarina speaking of the same society whose televised Donahues and Oprahs vie daily for supremacy in the parade of perverts? A society in which schoolchildren read books entitled "Heather Has Two Mommies" and where drag queens and leather fetishists are glorified with annual parades? Just because these Ozark trolls watched the '60s pass them by and have apparently regretted it ever since, must the entire nation look on in horror as they compulsively experience their belated sexual coming-out in public? At the very least, can't someone persuade Gebbies to add "And that's what hotel rooms are for"?

The views expressed above are those of the Las Vegas Review-Journal.

RCVP.
NOV - 6 1993



Letter
manuscript

Kristine Gebbies
The Clinton Administration
Washington, D.C.



Kristine

NOV 12 1993

You are right on! America's children
have been eaten for Breakfast lunch & dinner
because of our repressed sexuality. Molestation
of children must stop. We must bring America
out of Sexual Repression Nudity instead
of violence. God's for 486 Abortion Love
Just Passion Music Art Romance & Emotion
Love - vulnerability is openness to life

dance - Self pleasuring - masturbation
is God's love to self & understanding
Oh no condoms they are not biodegradable
& pollute. God hates them. And another
thing (9) is preferred sexual birth
control - Tell Fabio Real men love
Jesus & shave twice a day not twice
a week - Ladies don't like razor
burn. And the guys. God is tolerant
for generational abuse but no
man sleeps with women & men
no MAN - they must choose Period.
God wants you to make love as if death
was coming next show him a good time
you can bet he's watching. So keep
up the sex talk - God's with you Kristine
& definitely enjoy yourself.
and Swallow Tail Butterflies — XOXO

NOV 12 1993

Mandy
White House
20500
Washington d.c.



150th

Mercury - Kristine Gebbie

AEROGRAMME • VIA AIRMAIL • PAR AVION

2 Second fold

NOV 12 1993

Do not use tape or stickers to seal • No enclosures permitted

1 Fold first at notches

Additional message area:

PHOTOCOPY
PRESERVATION

KRISTINE GEBBIE
FEDERAL AIDS COORDINATOR
WHITE HOUSE
1600 PENNSYLVANIA AVE.
WASHINGTON, D.C.

EXCHANGING NEEDLES IS JUST LIKE EN-
COURAGING DRUG USE.

THE WHOLE CLINTON ADMINISTRATION STINKS.

WE SHOULD GET RID OF ALL THE COMMUNIST,
DRUG USERS, GAY'S ETC, WE HAVE IN THE
WHITE HOUSE.

AIDS PEOPLE SHOULD BE PUT IN ~~ALCATRAZ~~
ALCATRAZ ISLAND, TILL THEY ALL
DIE THAT ALSO GOES FOR THE HIAT AND
WE TOOK IN THE COUNTRY. WE ARE BECOMING
A THIRD WORLD COUNTRY, THE AMERICAN DREAM
IS GONE.

UNHAPPY WITH THE CLINTONS

file -
no return
address/name -
1

Coordinator backs needle exchanging

THE ASSOCIATED PRESS

WASHINGTON — The new federal AIDS coordinator endorsed needle exchanges for drug addicts yesterday but stopped short of urging condom distribution in schools. She said she will coordinate all government AIDS programs with a staff of five.

Kristine Gebbie, who was appointed by President Clinton last week after others turned the post down, said she's been given "clear authority to work across the Cabinet" on federal efforts to deal with the epidemic.

She made the rounds of the TV talk shows yesterday morning and said in an interview carried on the Fox network that "I can't work miracles."

Later in that same interview, she said her staff will be "very small — four or five people at maximum."

Gebbie's appointment came shortly before the National Commission on AIDS issued a report that criticized the Clinton administration for being more talk than action in the issue.

PHOTOCOPY
PRESERVATION



KRISTINE GEBBIE
WHITE HOUSE
1600 PENNSYLVANIA AVE,
WASHINGTON, D.C.

FEDERAL AIDS COORDINATOR

Dear Mrs. Calbie.

RECEIVED

DEC 22 1993

Without a doubt you are a stupid disgrace & I understand that you went to a ^{good} Christian college. It is just terrible that you're encouraging young boys & girls to be homosexuals & lesbians, when at that age many teenagers are confused about sexuality. Maybe they're afraid, at first, of the opposite sex, but as they gain skills in talking to members of the opposite sex & dating, they may learn to love / like a member of the opposite sex. You I suppose, support NAMBLA where homosexuals want to get rid of any age of consent; i.e., they want to prey on little

REVIEWED
Children as young as 3 yrs. of age!
Grow up.

Aren't you aware that
anal intercourse + the use of
infected IV needles cause + spread most
of the AIDS ^{in the U.S.}? You need to talk about this
bad behaviour that's spreading AIDS.
It should stop!

Also when we have the highest illegitimacy
rate ~~in~~ the industrialized
countries, you should not be encouraging
unmarried + irresponsible sex ~~among~~ kids!
Aren't you even aware that
90 90 of the men in ~~the~~ federal prisons
have unwed teenagers for mothers?

You're not doing one thing to discourage
bad behaviour that causes AIDS,
are you? You're a failure, a disgrace
to your college + the nation, +
you should resign now.
You're unbelievably stupid at
your job!



National Coalition for the Homeless



November 10, 1993

NOV 22 1993

Kristine Gebbie
National AIDS Policy Coordinator
750 17th St. NW (Suite 1060)
Washington, D.C. 20503

Dear Kristine:

I apologize for this somewhat belated thank you for joining us for the NCH board meeting. You made a significant contribution to our board's understanding of the Clinton Administration's efforts to address the AIDS crisis. I heard many positive comments about your presentation and I am sure you will hear from several of our members for follow information and advice.

I especially appreciate the fact that you were able to join us on a Sunday. I know that Washington folks seldom stop just because the weekend has arrived, but I think coming out to speak at a meeting was far above and beyond the call of duty.

We at NCH certainly appreciate your work and stand ready to assist you as appropriate. As tragic as homelessness is, allowing someone with AIDS to be homeless is unconscionable.

Again, thanks for joining us.

Sincerely,

Fred Karnas, Jr.
Executive Director



National Coalition for the Homeless

1612 K Street, N.W. #1004

Washington, DC 20006



Kristine Gebbie
National AIDS Policy Coordinator
750 17th Street, N.W. (Suite 1060)
Washington, D.C. 20503



NLGJA

N E W Y O R K

National Lesbian & Gay Journalists Association ▼ New York Chapter

September 27, 1993

Kristine Gebbie, RN, MN
National AIDS Policy Coordinator
200 Independence Avenue, SW
Washington, DC 20201

Dear Ms. Gebbie:

Thank you for speaking at the Saturday luncheon at the Second Annual National Lesbian and Gay Journalists Association Conference in New York earlier this month.

According to verbal and written comments, the Conference was very well received by all who attended. Most expressed the opinion that the sessions met our goal of bringing insight to the concerns of coverage of gay and lesbian issues and fighting discrimination in the workplace. Your candid presentation constituted a significant contribution toward the great success of the conference. We sincerely appreciate your generous donation of time and effort to NLGJA.

We hope you would be willing to speak again at a future NLGJA conference, should an appropriate topic be chosen for the program.

Thank you again for your participation.

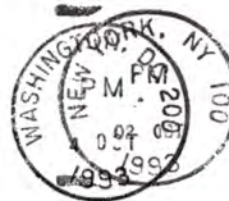
Sincerely,



Alan Flippen
Conference Chair

Say "hi" to John Gurnola - he did a great job setting things up - and thanks again... AL

Alan Flippen
Conference Chair, Second Annual NLGJA Convention
63 West 85th Street
New York, New York 10024



Ms. Kristine Gebbie, RN, MN
National AIDS Policy Coordinator
200 Independence Avenue, SW
Washington, DC 20201





DEC - 2 1993

American Academy of Nursing

Established 1973 Under the Aegis of the American Nurses' Association

TO: Speakers and Moderators
HIV/AIDS Summit

FROM: Janet Heinrich, DrPH, RN, FAAN
Director

DATE: November 29, 1993

RE: Participants Expenses/Reimbursement/Conference Outcomes

*Steve
Send extra
copies of the
announcement
to HH*

Enclosed please find extra copies of the HIV/AIDS Summit announcement. Please distribute and encourage your colleagues to attend. We have also included the names, addresses and phone numbers of speakers and moderators for the Summit.

If you are a speaker at the Summit, the Academy will waive the registration fee, pay for your travel and per diem, and pay a small honorarium for the paper you write. Please follow the instructions you received from William Holzemer and colleagues who have the responsibility for pulling the papers and recommendations together at the end of the conference. If you are a Plenary speaker, please contact the individuals on your panel to make sure that everyone is clear about their topics, critical issues and evolving concerns are incorporated in the presentations, and that panels have time allocated for discussion.

If you are a moderator, the Academy will waive the registration fee and reimburse you for your travel and per diem. We ask that you be in contact with the Plenary speaker, that you assist with any audio visuals, and that you serve as time keeper and also facilitate the discussion of the panel.

If you are unable to accept Academy reimbursement for your participation in the Summit, or if you wish to donate your efforts or have other resources to cover the costs of your travel and per diem expenses, we will be most happy to accommodate your needs.

Thank you for your efforts thus far. We look forward to working with you on this very important conference. Please call if you need further clarification. I can be reached at 202-554-4444 X150.

SPEAKERS AND MODERATORS FOR THE HIV SUMMIT

Sandra VanDam Anderson,
PhD, MSN, FAAN
Nurse Scientist
World Health Organization
Global Programme on AIDS
20, Avenue Appia
M Building Room 429
1211 Geneva, Switzerland
Phone 41-22-791-4702 (4)
Fax 41-22-791-0746

John Killen,
MD
Acting Director, Division of AIDS
National Institute of Allergy and Infectious Diseases
Building 31 Room 7A 03C
Bethesda, MD 20892
Phone 301-496-0545
Fax

Marilyn Chow,
DNS, RN, FAAN
1740 Jones St.
San Francisco, CA 94109
Phone (415) 931-5159

Barbara Russell
MPH, RN, CIC
9173-6 Fountainbleau Blvd.
Miami, Florida 33172
Ms. Russell
Phone 305-596-6574
Fax 305-270-3650

Lloyd Novick,
MD, MPH
Director, Office of Public Health
New York State Health Department
Empire State Plaza
Corning Tower-Room 1482
Albany, NY 12237
Phone 518-474-0180
Fax

Richard L. Sowell,
PhD, RN, FAAN
Director of Research and Client Services
AID Atlanta, Inc.
1438 West Peachtree Street; Suite 100
Atlanta, GA 30030
Phone 404-874-6517
Fax 404-885-6799

Dennis Andrulis,
PhD, MPH
President, National Public Health & Hospital Institute
1212 New York Avenue, NW
Suite 800
Washington, DC 20005
Phone 202-408-0223
Fax

Christine M. Gebbie,
MN, RN, FAAN
National AIDS Policy Coordinator
730 17th Street, N.W.
Suite 1060
Washington, DC 20500
Phone 202-632-1090
Fax 202-690-7054

Loretta Sweet Jemmott,
PhD, RN, FAAN
16 Bertrand Drive
Princeton, NJ 08540
Dr. Jemmott
Phone 201-648-5293
Fax

Jeff Kelly,
PhD
Professor
Medical College of Wisconsin
8701 Watertown Flank Road
Milwaukee, WI 53226
Phone 414 287-4680
Fax

John B. Jemmott,
PhD
16 Bertrand Drive
Princeton, NJ 08540
Dr. Jemmott
Phone 201 648-5293
Fax

Barbara Aranda-Naranjo,
MS, RN
Department of Pediatrics
University of Texas HSCSA
7703 Floyd Curl Drive
San Antonio, TX 78284-7818
Phone 210-692-3641
Fax 210-615-0658

Peter J. Ungvarski,
MS, RN, FAAN
Clinical Nurse Specialist HIV
Visiting Nurses Service of New York
AIDS Services
350 Fifth Avenue; Suite #530
New York, NY 10118
Phone 212 560-5972
Fax 212 560-5904

David Vlahou,
PhD, RN
Associate Professor
School of Hygiene & Public Health
Johns Hopkins University
615 North WOLFE sTREET
Baltimore, MD 21218
Phone 410-955-1848
Fax

Jackie Peterson,
MD
SFGH/USCF
995 Potrero, Ward 95
Room 513
San Francisco, CA 94110
Phone 415 476-5325
Fax 415 476-0341

Jacquelyn H. Flaskerud,
PhD, RN, FAAN
Professor & Associate Dean of Academic Affairs
UCLA- School of Nursing
10833 Le Conte Avenue
Factor 3-242
Los Angeles, CA 90024-1702
Phone 310 825-8405
Fax 310 206-7433

Ann B. Williams,
EdD, RN, C, FAAN
58 Downing Street
New Haven, CT 06513
Dr. Williams
Phone 203 737-2350
Fax

Mary E. Ropka,
PhD, RN, FAAN
1621 Meadowbrook Heights Road
Charlottesville, VA 22901
Phone 804-296-8397
Fax

Jan Zeller,
PhD, RN
Professor
Rush Presbyterian Lukes Medical Center
Department of Immunology & Biology
1653 W. Congress Parkway
Chicago, IL 60612
Phone 312 942-3517
Fax 312 942-2808

Jill Strawn,
MS, RN
39 Colony Road
New Haven, CT 06511
Phone 203-784-0118
Fax

Mary Boland,
MSN, RN
Children's Hospital of N.J.
15 South 9th Street
Newark, NJ 07107
Phone 201-268-8267 (268-8273)
Fax

Kathleen Casey,
MS, RN
National Director
Home AIDS Program for
Critical Care America
P.O. Box 632
West Miller Road
Rhinebeck, NY 12572-0632
Phone 508-836-3610 ext. 5785
Fax 914-876-0858

Marie Annette Brown,
PhD, RN, ARNP, FAAN
Associate Professor
University of Washington
Community Health Care Systems
SM-24
Seattle, WA 98195
Phone 206-685-0815
Fax 206-543-8147

Anita Eichler,
MPH, MA
Division of HIV Services
Bureau of Health Resources Development
9A-05 Parklawn Bldg.
Rockville, MD 20857
Phone 301 443-6745
Fax 301-443-5271

Thomas P. Phillips,
PhD, RN, CS, FAAN
2304 Patternbond Drive
Silver Spring, MD 20902
Phone 301-443-6333
Fax 301-443-8586

Linda Reck,
MS
National Institutes of Health
Office of AIDS
Building 1 Room 201
Bethesda, MD 20892
Phone 301-496-0357 ext. 0358
Fax

Pauline Seltz,
MS, MPA, RN
The Robert Wood Johnson Foundation
College Road
P. O. Box 2316
Princeton, NJ 08543-2316
Phone 609-452-8701
Fax

Doris Mosley,
PhD, RN
AIDS Education & Training Program
Medicine Division, BHP, HRSA
5600 Fishers Lane
4C-05 Parklawn Bldg.
Rockville, MD 20857
Phone 301 443-6364
Fax 301 443-8890

Allen Harris,
RN
Research Nurse, HIV
Kaiser Permanente Medical Center
2590 Gary Blvd.
San Francisco, CA 94115
Phone 415-255-6711
Fax

Suzanne B. Henry,
DNSc, RN
Assistant Professor
University of California
3rd & Parnassus
Box 0608 School of Nursing
San Francisco, CA 94143-0608
Phone 415 476-5849
Fax 415-476-9707

Carmen J. Portillo,
PhD, RN
Assistant Professor
University of California
3rd & Parnassus
Box 0608 School of Nursing
San Francisco, CA 94143-0608
Phone 415 476-1630
Fax 415-476-9000

Judith Saunders,
DNCc, RN, FAAN
Assistant Research Assistant
City of Hope Nat'l Medical Ctr.
1500 E. Duarte Road
Duarte, CA 91010
Phone 818-358-8111
Fax 818-301-8346

Patricia E. Stevens,
PhD, RN
Post Doctoral Fellow
University of California
3rd & Parnassus
Box 0608 School of Nursing
San Francisco, CA 94143-0608
Phone 415-476-9707
Fax

Inge Coreless, PhD,RN,FAAN
MGH Institute of Health Professions
101 Merimac St.
Boston, MA 02116
Phone (617) 726-8018 (w)
FAX

Helen Miramontes, MSN,RN,FAAN
1267 Chestnut St #5
San Francisco, CA 94109
Phone (415) 476-6602

Margretta M.Styles, EdD, RN, FAAN
44 Sabal Palm
Largo, FL 34640
Phone (813) 584-3104

Nola Pender, PhD,RN,FAAN
Director, Center for Nursing Research
University of Michigan
School of Nursing
400 N. Ingalls Bldg
Ann Arbor, MI 48109-0824
Phone (313) 764-9555
FAX (313) 936-3644

James Halloran, PhD,RN

Ann Hughes, MN,RN
Clinical Nurse Specialist
AIDS Ward
San Francisco General Hospital
1001 Potrero, CA 94110
Phone (415) 206-5542

NATIONAL AIDS POLICY OFFICE
OFFICE OF THE COORDINATOR

ROUTING SLIP

DATE: 11/2

TO: _____

FROM: ✓ W. STEVE LEE

_____ For your information

_____ For your action _____

_____ Review and comment by (date) _____

_____ Prepare reply for Coordinator's signature

_____ Reply directly and blind copy Coordinator

_____ Circulate/forward to: _____

_____ File

COMMENTS: Request delivered

in a phone

SL

OCT 29 1993



BIOMEDICAL G R O U P

23 Spring Hill Road · Annandale, NJ 08801 · Tel: (908) 730-8717 · Fax: (908) 735-6842

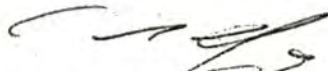
WELCOME!

Welcome to the Fogarty International Center/NIH Conference on Oxidative Stress in HIV/AIDS being held at the NIH, Bethesda, MD, November 8, 9, & 10.

Enclosed you will find travel, hotel, and registration information as well as a preliminary conference agenda.

If you have any questions prior to the conference, please feel free to call my office and talk to either myself or to Cindy Troy. The number is 908-730-8717 and the fax number is 908-735-6842.

With best regards,



Dr. Howard Greenspan,
Conference Director

Transportation:

Transportation will be provided each day between the Hyatt and the Stone House at the National Institutes of Health, the sight of the conference.

Conference Registration:

Enclosed please find the preliminary conference schedule. A conference registration desk will be set up Sunday evening between 6:00 and 8:30 at the Hyatt Hotel outside the Congressional Room, the Conference hospitality reception area. At that time you will receive a program that includes the final schedule, presentation abstracts, a list of attendees names and addresses as well as information on transportation between the Hyatt and the NIH. If you arrive later than Sunday evening, registration materials will be set up each morning outside the conference room at the Stone House.

Monday Dinner:

The conference is putting on a dinner Monday evening at 8:00 in the Cabinet Judiciary Suite at the Hyatt Hotel. You are invited as an honored guest. Please wear the name badge you will receive at the time of registration which also gives you entrance to the dinner. You will also receive lunch at the Stone House on Monday and Tuesday.

PRELIMINARY AGENDA

MONDAY NOVEMBER 8, 1993

8:00 - 8:15 WELCOME AND OPENING REMARKS
Howard Greenspan, Conference Chairman
Philip E. Schambra, Director, Fogarty International Center,
National Institutes of Health

SESSION I - Evidence for Oxidative Stress in HIV/AIDS

Moderator: Dr. Barry Halliwell

- 8:15 - 8:45 Free Radicals and Human Diseases: Implications for HIV/AIDS.
Barry Halliwell
- 8:45 - 9:15 Heterologus Neutrophils Enhance Human Immunodeficiency Virus Replication.
John L. Ho
- 9:15 - 9:45 Changes in Lymphoid Thiols After Activation by Mitogen or Exposure to HIV.
David A. Lawrence
- 9:45 - 10:15 Antioxidant Status of HIV Seropositive Patients, Effect of the Stage of the
Disease and Consequences on Lipid Peroxidation.
Alain Favier
- 10:15 - 10:30 BREAK
- 10:30 - 11:00 Oxidant-Induced Apoptosis of HIV-Infected, Antioxidant-Deficient T Cells.
Thomas M. Buttke
- 11:00 - 11:30 The HIV-1 Tat Protein Represses Mn-Superoxide Dismutase Expression in HeLa
Cells.
Joe M. McCord
- 11:30 - 12:00 Epidemiologic Evidence for Oxidative Stress During HIV-1 Infection:
Vitamin A Deficiency and Its Consequences
Richard D. Semba
- 12:00 - 12:45 Demonstration of Cysteine and Glutathione Deficiency in HIV-Infected
Patients. Inhibition of HIV-Replication and NFkB Activity by Cysteine
and Cysteine Derivatives.
Wulf Droge
- 12:45 - 1:00 REVIEW
- 1:00 - 2:00 LUNCH

SESSION II - Pathophysiology of Oxidative Stress in HIV/AIDS. The Effects on Viral Replication and Immune Cell Death

Moderator: Dr. Arnold Rabson

- | | |
|-------------|---|
| 2:00 - 2:30 | Effects of H ₂ O ₂ and Antioxidants on Activation of NF- κ B and AP-1 in Intact HeLa Cells
Patrick A. Baeuerle |
| 2:30 - 3:00 | Influence of Redox Status of Lymphocytes and Monocytes on HIV Expression and Immune functions. Evaluation <i>In Vitro</i> of Antioxidant Molecules as Potential Anti-HIV Therapy
Nicole Israel |
| 3:00 - 3:30 | T-Cell Activation as a Product of Oxidative Stress
Aftab A. Ansari |
| 3:30 - 4:00 | T-Cell Signal Transduction by Conventional Antigen and Superantigen: Differential Role of Reactive Oxygen Intermediates
Georg Weber |
| 4:00 - 4:15 | BREAK |
| 4:15 - 4:45 | Redox Plays a Central Role in T Cell Signalling, Regulation of HIV, and Possible the Progression of AIDS
Mario Roederer |
| 4:45 - 5:15 | Evidence for Multiple Mechanisms of Inhibition of HIV Expression by N-Acetylcysteine
Audrey Kinter |
| 5:15 - 5:45 | Methods for Assessment of Oxidative Damage to Humans
Edward Dratz |
| 5:45 - 6:15 | REVIEW |

TUESDAY NOVEMBER 9, 1993

SESSION II - (con't)

Moderator: Dr. Thomas Folks

- 8:00 - 8:30 Opening Remarks -
- 8:30 - 9:00 A Tetracycline-Sensitive Factor Involved in Oxidative Death of
Lymphocytes and its Interaction with HIV
Luc Montagnier
- 9:00 - 9:30 Programmed Cell Death (Apoptosis) and AIDS Pathogenesis
Jean Claude Ameisen
- 9:30 - 10:00 Oxidative Stress and Apoptosis
Sten Orrenius
- 10:00 - 10:30 Oxidative Stress as a Mediator of Apoptosis
Paul Sandstrom
- 10:30 - 10:45 BREAK
- 10:45 - 11:15 Promotion of Lipid Peroxidation and Its Role in Cell Death
Howard C. Greenspan
- 11:15 - 11:45 Regulation of the Bacterial Response to Hydrogen Peroxide: A Model for
Studying Oxidative Stress
Gisela Storz
- 11:45 - 12:15 Heme Iron and Oxidative Cell Death
John W. Eaton
- 12:15 - 12:45 REVIEW
- 12:45 - 1:45 LUNCH

**SESSION III - Plant Redox Systems Relevant to Cell Signaling
Mechanisms seen in HIV/AIDS**

Moderator: Dr. Dirk Inze

- | | |
|-------------|--|
| 1:45 - 2:15 | Introduction and Overview
Dirk Inze |
| 2:15 - 2:45 | The Study of Signal Transduction Pathways for Plant Responses to
Oxidative Stress
William Van Camp |
| 2:45 - 3:15 | Roles and Regulation of Antioxidative Systems in Plant Chloroplasts
Helen A. Norman |
| 3:15 - 3:45 | Superoxide Dismutase and Stress Tolerance in Plants
Chris Bowler |
| 3:45 - 4:00 | BREAK |
| 4:00 - 4:30 | Regulation of Transcription by Oxidants and Antioxidants in Plants
Alex Levine |
| 4:30 - 5:00 | The Role of Flavonoids as ReDox Regulators
Barry Halliwell |
| 5:00 - 5:30 | The Role of Quercitin and Quercitin Glycosides in HIV and AIDS:
Inhibition of Oxidative Damage, Signal Transduction and HIV Integration
Terry Leighton |
| 5:30 - 6:00 | The Antioxidant Role of coenzyme Q-Biomedical Implications of AIDS
Robert Beyer |
| 6:00 - 6:30 | REVIEW |

WEDNESDAY NOVEMBER 10, 1993

SESSION IV - Proposed Therapeutic Regimens and Clinical Trial Models

Moderator: Dr. Lenore Herzenberg

- 8:30 - 9:00 Antioxidant Vitamins and Immune Function
 Adrienne Bendich
- 9:00 - 9:30 Effects of N-Acetyl-Cysteine (NAC) on the T Cell System in vivo. Results of a
 Placebo Controlled Double-Blind Trial
 Wulf Droge
- 9:30 - 10:00 Decrease Glutathione in Those HIV Infected may Account for Decrease
 Proliferative Responses and Increased Inflammatory Stress
 Leonard A. Herzenberg
- 10:00 - 10:30 Characterization of Antioxidants: Implications for Agents Proposed for
 HIV/AIDS Treatment
 Okezie I. Aruoma
- 10:30 - 10:45 BREAK
- 10:45 - 11:15 Prevention of Early Cell Death in Peripheral Blood Lymphocytes of HIV Infected
 Individual by an Anti-Oxidant: N-Acetyl Cysteine
 Rene Olivier
- 11:15 - 11:45 L-2 oxothiazolidine-4-Carboxylate (Procysteine) A Cysteine Pro-Drug. Review of
 In-Vitro and Early Clinical Studies in HIV Infection
 Michael M. Lederman
- 11:45 - 12:15 Antioxidant-Containing Designer Foods for AIDS Patients
 Herb Pierson
- 12:15 - 12:45 Oxidative Stress in HIV Infection: A Pilot Study for a Trial of Nutritional
 Intervention
 Julie E. Buring
- 12:30 - 1:00 Beta Carotene in HIV Infection
 Gregg O. Coodley
- 1:00 - 1:30 Positive Effects of Vitamin E Intake on Lymphocytes From Aged Subjects
 Avner Shenfeld
- 1:30 - 2:00 REVIEW & CLOSING REMARKS

The convenience of the city with the comfort of the suburbs



- **FROM WASHINGTON NATIONAL AIRPORT:** Take the Metrorail to the Bethesda (Red Line) stop. By car, take George Washington Parkway North to 495 toward Maryland. Take Exit 34, Wisconsin Avenue. Follow about 2 1/2 miles. Hotel on the right-hand side.
- **FROM DULLES AIRPORT:** Take the Dulles Access Road to 495 North. Take Exit 34, Wisconsin Avenue. Follow about 2 1/2 miles. Hotel on the right-hand side.
- **FROM THE NORTH:** Take I-95 South to 495 towards College Park/Silver Spring. Take Exit 34, Wisconsin Avenue toward Bethesda. Follow Wisconsin Avenue about 2 1/2 miles. Hotel on the right-hand side.
- **FROM THE SOUTH:** Take I-95 North/Frederick. At the 495/I-270 split, bear right onto 495. Take the second exit, Wisconsin Avenue (355 South). Follow about 2 1/2 miles. Hotel on the right-hand side.

Ms. Bebbin

PHOTOCOPY
PRESERVATION

November 4, 1993

Kristine M. Gebbie
AIDS Policy Coordinator
HHS Building
200 Independence Avenue, Room 738 G1
Washington, D.C. 20201

Dear Ms. Gebbie:

We are writing to invite you to a meeting to learn more about an event that has the potential to significantly alter the way we approach young people regarding the issue of HIV and AIDS. We are co-hosting a meeting to inform leaders in the fields of health and education about a National Youth Summit on HIV prevention that we are planning to hold in the summer of 1994. This informational meeting will be held on November 30th, from 9:30 am until 12:00 pm, in the Board Room, 5th Floor, at the American Council of Life Insurance offices at 1001 Pennsylvania Avenue NW.

The purpose of the Youth Summit is twofold. First, it will be a time for adults to listen to young people. At the summit, a broadly representative group of 100 - 150 young people aged 15 to 19 will be invited to work together in making recommendations about future AIDS/HIV prevention programs for young people. These young people will be invited to articulate: (1) what kind of HIV prevention programs they want and feel will be effective, and (2) what more the nation should do to prevent the spread of HIV among young people.

Second, the summit will be deliberately designed to be a high profile event, so that the young people's recommendations are conveyed to the widest possible audience. As cases of HIV among young people continue to climb, we feel a need to bring the urgency of this issue before the public again. Thus, we are seeking to design an event that would draw much needed media attention and leverage stronger support for HIV prevention efforts directed towards young people.

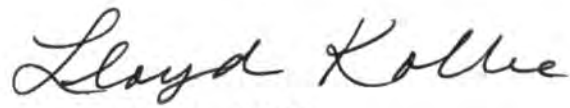
Page 2
November 4, 1993

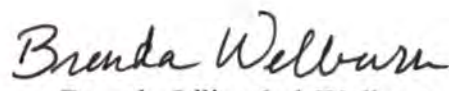
A coalition of national youth serving, education, health, and AIDS organizations will collaborate to plan and carry out the Youth Summit. We ourselves are committed to this process, and we hope that your organization will join us. At the November 30th meeting, we will explain this project in greater detail and solicit your ideas for making it work.

We look forward to meeting with you on November 30th. A form for replying is attached; please fax it to Lynne Greabell at NASBE at (703)836-2313 by November 19th.

Sincerely,


Stanley G. Karson
Executive Director
INSURE


Lloyd Kolbe, Ph.D.
Director, Division of Adolescent
and School Health
Centers for Disease Control
and Prevention


Brenda Lilienthal Welburn
Executive Director
National Association of
State Boards of Education

Name

Organization

_____ Yes, I will be attending the November 30th meeting.

_____ No, I cannot attend, but I am interested, so please
keep me on your mailing list.

_____ No, I cannot attend.

Please fax to Lynne Greabell at (703) 836-2313.

1012 Cameron Street
Alexandria, Virginia 22314

703-684-4000
FAX 703-836-2313


Gene Wilhoit
Executive Director

NASBE
NATIONAL ASSOCIATION OF
STATE BOARDS OF EDUCATION

1012 Cameron Street
Alexandria, Virginia 22314
[REDACTED]

Kristine M. Gebbie
AIDS Policy Coordinator
HHS Building
200 Independence Avenue, Room 738 G1
Washington, D.C. 20201

11/05/93 NO1 085 6ME 080V47E08 150 389#6



Tucson Community Foundation

6601 East Grant Road, Suite 111
Tucson, Arizona 85715
602-722-1707
Fax 296-2387



November 9, 1993

RECEIVED

NOV 22 1993

Back
Wink

File

Ms. Kristine M. Gebbie
National AIDS Policy Coordinator
750 17th Street, NW, Suite 1060
Executive Office of the President
Washington, DC 20503

Dear Ms. Gebbie,

Our Public Policy Forum, "Arizonans in Partnership: One Voice for HIV/AIDS Policy Reform," was a great success in helping us identify some key issues that need addressing in Arizona.

Thank you for your part in making the day a success. We were sorry you weren't able to be there, but your video-taped welcoming remarks were an important addition and helped set the tone for the day's work.

We had over 160 persons at the Forum, which makes it the largest to date of NCAP's Forums around the country. Participants indicated they were very pleased with the presentations, and came away energized to tackle some of the difficult challenges we face.

We are looking forward to the next phase in this project as our statewide group targets some specific areas that can be addressed in the near future.

Thank you again for your part in the day's presentations.

Sincerely,

Roger Harlan

Roger Harlan
Coordinator
Tucson HIV/AIDS Care Consortium

chron

NOV - 5 1993



P.O. Box 15597
KENMORE STATION
BOSTON, MA 02215

November 3, 1993

Ms. Kristine Gebbie
Office of AIDS Policy Coordination
750 17th St. NW Suite 1060
Washington, DC 20503

Dear Ms. Gebbie,

Thank you for generously giving of your time by attending the viewing of *Sex Education in America: AIDS and Adolescence* and by meeting with Pedro, Antigone, Kerry and me at your office.

As you requested, we have edited the segment of the documentary that pertains to school boards onto this VHS tape. I hope that you will find it useful in your presentation.

Please consider challenging members of the corporate world to make education of youth a priority. Young people are at such extraordinary risk for HIV infection yet I am continually struck by how few schools and organizations are making preventative education a priority. Corporate America must rise to the challenge if the work force of the future is to be protected.

Here in Massachusetts corporations have responded generously to my work in reaching young people with potentially lifesaving information. The documentary project, *Sex Education in America: AIDS and Adolescence* was supported by:

- Harvard Community Health Plan Foundation
- Lotus Development Corporation

To keep the documentary affordable, as we had promised educators, Media Works, Inc., my non-profit production company fulfills orders, rather than relying upon a commercial fulfillment company. Corporate in-kind services supports this effort. These donations include:

- An 800 number for incoming calls donated by MCI
- Access to John Hancock Insurance Company's voice mail system

As I mentioned to you, corporations have also put AIDS education materials directly into the hands of young people throughout Massachusetts through donations to the RISKY TIMES Book Project.

John Hancock Financial Services launched this corporate initiative by providing a copy of the book, plus the complimentary parent's guide, to every student in the Boston Public Schools. The book is the cornerstone of the AIDS education curriculum. 18 corporations joined John Hancock in the effort and have since provided nearly 75,000 copies of RISKY TIMES to school children. Many of the contributing corporations followed sponsorship of the book with a town meeting that brought together educators, members of the clergy, parents and young people, some of whom were HIV+, for a discussion about the threat of HIV to young people. Among the corporations participating in the RISKY TIMES Book Project are:

- AT&T
- REEBOK
- Gillette
- IBM
- Liberty Mutual Insurance
- Lotus Development Corp.
- Digital Equipment Corp.
- State Mutual Insurance Co.
- Striderite Corporation
- Arthur D. Little Inc.
- Shawmut Bank
- Bank of Boston
- DAKA International
- Very Fine, Inc.

- New England Development Corp.
- Harvard Community Health Plan Foundation
- The Boston Company
- Patrick J. Woods Insurance, Inc.
- Lowe's Theaters

The documentary, *Sex Education in America: AIDS and Adolescence* and the book, RISKY TIMES: How to be AIDS-Smart and Stay Healthy are two proven resources available to communities. I hope you will offer them as examples of how corporate leadership is making a difference. Please challenge business leaders to commit both their resources and their connections to saving the lives of an entire generation at risk. You have now viewed the documentary. I am sure that you can see its value to communities struggling over how or whether to provide young people with information about sexuality. As you told Pedro, he has given the gift of himself on film. Please give him the gift of your efforts to assure that as many people as possible benefit from his contribution.

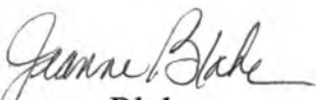
Please encourage anyone interested in taking the initiative on this to give me a call to discuss ways we can work in partnership. I can be reached at 617-247-1902 or 800-600-5779.

As we discussed, I will call you when I have scheduled my next visit to Washington, DC. I will appreciate the opportunity to share with you specific ideas I have about AIDS prevention.

My best wishes to you as you continue your most difficult work. I am sure you are heartened by the knowledge that there are many dedicated people available to support your efforts.

Thank you again for your consideration.

Sincerely yours,


Jeanne Blake

Consider this:

- *More than 20% of AIDS cases in the United States are among people aged 20-29. Because of the ten year median lag time between HIV infection and the onset of AIDS, it is estimated that the majority of these individuals were infected during adolescence.*
- *86% of all sexually transmitted disease occur among persons aged 15-29. 24% among persons aged 13-19.*
- *The incidence of AIDS among teen-aged girls is three times higher than among adult women. 37% of all teenagers diagnosed with AIDS are female, but only 10% of all adults with AIDS are female.*
- *Less than half of all high schools students (44%) reported using condoms during their last sexual intercourse. Black male high school students were most likely to have used condoms (55%) and Hispanic women were least likely to have used condoms (28%).*

The Boston Globe

A timely AIDS documentary

"Sex Education in America: AIDS and Adolescence," a remarkable though sobering television documentary, makes its official debut in Washington today under the aegis of the Harvard AIDS Institute and AT&T. It will undergo formal review by a number of federal authorities, including the surgeon general, Dr. Joycelyn Elders, a featured commentator; and members of Congress, guests of Rep. Gerry Studds.

The timing of the documentary could hardly be more fortuitous. Though there is clear-cut evidence of a rising rate of AIDS infection in teenagers, the problem is largely ignored, or worse, opposition is rallied against public school programs that would provide comprehensive sex education to prevent the spread of AIDS.

Produced by Jeanne Blake, a former medical news reporter for WBZ-TV in Boston, the documentary carries a powerful warning. It depicts the tragedy that is unfolding as society continues to deny teen-age sexuality and the high risk for ado-

lescents of contracting AIDS and other sexually transmitted diseases.

The story is basically told by American teenagers who are already infected with the AIDS virus. They do not shrink from the reality that they became infected as a result of their awakening sexual activity.

The message is heartbreaking. As Huntly Collins, the distinguished AIDS writer for The Philadelphia Inquirer, has noted: "the central, ultimate truth of the disease remains: If you are infected . . . you eventually get AIDS and die."

In the face of such unforgiving facts, one would think American educators and parents would be virtually forcing detailed information about sex and its risks on youngsters. Instead, small but active conservative alliances mistake ignorance for innocence and are working to curb sex education and bar condom distribution.

This documentary is a wake-up call to teenagers on the life-or-death threat posed by AIDS.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Bethesda, Maryland 20892

OCT 28 1993

RCVD
NOV - 6 1993

TO: National AIDS Policy Coordinator
Through: Acting Director, NIH *Elfincho* OCT 23 1993
FROM: Director, Office of AIDS Research
SUBJECT: AIDS Coordination Efforts

We were pleased to have you visit the NIH on September 27, 1993. We have received many favorable comments from the Directors and AIDS Coordinators of the Institutes, Centers, and Divisions (ICDs) who attended the briefing.

As you will recall, during the meeting a specific example of coordination among the programs of several ICDs was described by the AIDS Coordinator for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). This coordination effort, involving NIDDK, the National Institute of Allergy and Infectious Diseases, and the Office of Research on Women's Health, resulted in the funding of studies of body composition, metabolism, and nutrient intake and the use of nutritional and hormonal therapies for wasting in HIV-positive women. A brief description of this effort is attached. We hope you find this information useful.

We look forward to future cooperation between your office and the NIH. Best personal regards.

Anthony S. Fauci
Anthony S. Fauci, M.D.

Attachment

cc:

Dr. Philip Gorden
Dr. Judith Fradkin

Example of Inter-institute Coordination in Support of Research on Wasting in AIDS

Wasting, characterized by significant depletion of muscle mass, is a major source of morbidity and mortality in HIV infection and AIDS. Short-term therapy with growth hormone has been shown to have a beneficial, anabolic effect on protein metabolism and to produce significant weight gain in a small group of HIV-positive men with significant weight loss studied at the University of California at San Francisco. This work was supported by a grant from the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) and carried out in a General Clinical Research Center supported by the National Center for Research Resources. Studies are now underway to assess the effects of longer duration of therapy. The investigators proposed to determine whether the benefits observed in men can be achieved in women and to determine whether there are gender-based differences in the metabolic response to HIV infection and to therapy with anabolic agents. Despite considerable effort, recruitment of women with the weight loss criteria required for inclusion in the study has been problematic. In addition to the well-recognized problems with recruiting HIV-infected women into research studies, the investigators believe they are observing a gender-based difference in the metabolic response to HIV infection. These differences may affect women's responses to AIDS and potential therapies for the wasting associated with AIDS. To help overcome the barriers to addressing this important question, NIDDK staff invited the investigators to submit an application for supplemental funding under a program of the Office of Research on Women's Health (ORWH). The supplemental project involves collaboration with an innovative consortium, the Bay Area Research Consortium on Women and AIDS (BARCWA). BARCWA was established with funding from the National Institute of Allergy and Infectious Diseases for community outreach to enhance recruitment and retention of HIV infected women. BARCWA is pioneering new techniques for recruitment of HIV positive women as study participants, and minorities are well-represented in the population successfully recruited. The ORWH supplement to the NIDDK funded grant will support studies of body composition, metabolism and nutrient intake in HIV positive women. In addition to defining mechanisms of weight loss, women will be followed and entered into the parent project studies of nutritional and hormonal therapies for wasting when they meet the entrance criteria.

Prepared by: Judith Fradkin, M.D. (NIDDK)



**National
Community
AIDS
Partnership**

OCT 25 1993

October 19, 1993

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Paula Van Ness
Executive Director

1140 Connecticut Avenue, NW
Suite 901
Washington, DC 20036-4001
Tel: (202) 429-2820
Fax: (202) 429-2814

Heart Strings 101
1252 W. Peachtree Street
Suite 554
Atlanta, GA 30309
Tel: (404) 876-4673
Fax: (404) 885-9734

Ms. Kristine M. Gebbie, RN, MN, FAAN
National AIDS Policy Coordinator
Hubert Humphrey Building, Room 738-G
200 Independence Avenue, SW
Washington, DC 20201

Dear Ms. Gebbie:

On behalf of the National Community AIDS Partnership and the Youth Advisory Board, thank you for making a presentation on a very wet day in Washington. Your message was positive, forceful and very much appreciated.

As we proceed with our work with youth and HIV, we are glad to be in partnership with you and your office.

Again, thank you for taking the time to share your thoughts and commitment with our Youth Advisory Board.

Sincerely,

Paula Van Ness
Executive Director

PVN:glw