September 26, 1994

TO: Hillary Rodham Clinton
FROM: Lissa Muscatine
RE: Lasker Video

1. <u>What lessons might Americans learn from Mary Lasker's life and accomplishments?</u>

We all can learn the real meaning of citizenship from her life and her accomplishments. I sometimes say that one has to find in life the proper balance between "me" and "we". Mary Lasker understood that each of us has a responsibility to the larger community we live in. She taught us that there is more to being a good citizen than just focusing on "me". She showed us the importance of focusing on "we" as well.

She really believed she could contribute and make a difference, and she did. But what is so extraordinary about her life is that she didn't pick one cause, she picked many, from medical research to urban beautification to education to the arts. And in each of those areas she left a lasting mark.

2. <u>What value in American society have the Lasker Awards served?</u>

There are three separate awards (basic research, clinical research, public service) and each has made a difference in its own way. First, if you consider that 50 winners of the Lasker Awards since 1944 have gone on to win Nobel Prizes, you appreciate the impact of the awards not only on the research community but also on everyday people who benefit as well.

The Lasker awards are an emblem of serious research. From Col. Menninger's breakthroughs on psychiatry to work that has advanced our understanding of the nature of the gene, the Lasker awards have contributed to some of the most important medical discoveries of our time.

In that sense, the awards not only recognize and celebrate cutting edge research, they make it possible for that research to continue. And they affirm the role of research in our society and remind us that we can't make progress without people in laboratories and clinics toiling away day after day in search of answers to some of nature's most baffling mysteries.

The public service award celebrates men and women who contribute in public ways to medical research. And again, they reflect Mary Lasker's belief that you don't have to be a doctor or a scientist to make a difference in helping fight disease and improve the health care of Americans. Each of us can contribute

in different but important ways.

3. What were the ways that Mary Lasker was a role model of citizen activism in our country?

She was living proof that you don't have to be an expert to get involved and make a difference. She showed us that, if you care enough, you can make a difference.

She was passionate about trees and flowers, for example. So she singlehandedly transformed some of the most blighted areas of New York City with flowers that could bloom in winter. She planted trees and flowers all over New York and here in the nation's capital because she believed that natural beauty inspired people to feel better about themselves and the world around them.

In terms of medical research, she didn't just raise money or give money. She really got involved. She used to say she would be kicked out of a laboratory in five minutes because she knew nothing about research. But she knew what researchers needed and how to get it for them. So she went to Congress and lobbied and lobbied and lobbied -- in the traditional sense. She applied her powers of persuasion, her vision, her intelligence to causes she believed in and causes that would make the world a better place.

4. Give a summation of her special contribution to American health and quality of life

She probably did more as a single individual for American medicine than anyone of her generation. First, she got people to move beyond taboos and talk about illnesses like cancer and mental illness in realistic ways. The public awareness campaign she and her husband launched in the 1940s evolved into the American Cancer Society. Her efforts on Capitol Hill and her work as a fundraiser helped establish the National Institutes of Health. And of course the Lasker Foundation that she and her husband established has helped finance some of the most important medical research of this century.

5. What words and concepts come to mind when you ponder Mrs. Lasker and the impact of the Lasker Awards?

When I think of her, the word that most quickly comes to mind is humanity. Everything she did, everything she was, embodied our highest ideals of humanity.

I also think of vision. Intelligence. Energy. Compassion. Courage. And finally, optimism, because she believed we can all make a difference if we try. She believed we can make the world a happier, healthier place.

When I think of the impact of the awards I think of progress. Of depth and breadth, because the research has touched so many areas. I think of service, because the awards are a form of public service, and those being honored are performing public service either in laboratories or as advocates for medical research.

6. What loss do we have as a nation with her passing?

She was one-of-a-kind. I wish this weren't true, but there are very few people in our world with as big a heart and as big a spirit as she had. To that extent, she will always be a role model for us, an inspiration to do more, to do better, to give in new ways. So while we have lost her and that incredible charm and vitality and commitment, we will always have her legacy and the example of what it means to be a true humanitarian.

7. How as Americans can we take up the standard she carried for 50 years?

It's important that, as individuals, we exhibit that same sense of responsibility and concern for those around us. Mary Lasker never retreated into herself. She never rested on her laurels. She realized that no matter how comfortable her own circumstances were, there was plenty of work to be done to improve society. To her that meant eradicating the diseases that affect all people. It meant beautifying outdoor spaces for everyone to enjoy. It meant encouraging and enhancing the arts, which enable Americans from all walks of life to share their emotions and expressions in creative ways. It meant strengthening educational institutions in ways that benefit all of society.

Our greatest tribute to her is to follow her example and never give up the world's fight. To remember there is always work to be done. And to remember that there is no blueprint for contributing -- that we must find ways that fit in with who we are as individuals and our special vision of the future.

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To: Lissa
Fr: Liz

September 24, 1994

PHONE IN INTERVIEW FOR MARY WOODARD LASKER VIDEO TRIBUTE

DATE:	**Monday, September 26**
TIME:	**2:30 pm**
LOCATION:	**HRC's office**
FROM:	**Liz Bowyer**

I. PURPOSE

To do a 20-minute interview for a video tribute to Mary Lasker.

II. BACKGROUND

The Lasker Foundation is developing a 5-minute video tribute to Mary Lasker to be shown at this year's Lasker Medical Research Awards Luncheon on September 30th. The video will feature voice-overs of some of Mrs. Lasker's closest friends talking about their personal recollections of Mrs. Lasker and her contributions to American health care and medical research. The taped interviews will be edited and made into shortened voice-overs for the video.

The Foundation has asked you, Eppie Lederer, Lady Bird Johnson, Dr. Jordan Gutterman, who directs the Lasker Foundation Awards program; James Fordyce, Mrs. Lasker's nephew; and Dr. Michael Debakey, who has chaired the Awards jury for many years, to participate.

The Lasker Foundation would like the interviews to be as relaxed and unrehearsed as possible. Sharon Powers, President of Brown and Powers Associates (the Lasker Foundation's PR agency), will conduct your phone-in interview. She will ask you a series of questions relating to the following subjects:

- The lessons Americans might learn from Mary Lasker's life and accomplishments.
- The value in American society that the Lasker Awards have served.
- The ways that Mary Lasker was a role model of citizen activism in our country.
- A summation of her special contribution to American health and quality of life.
- Words and concepts that come to mind when you ponder Mrs. Lasker and the

impact of the Lasker Awards.

- The loss we as a nation have with her passing.
- Ways we as Americans can take up the standard she carried for 50 years.

III. PARTICIPANTS

HRC
Sandra Powers, President of Brown and Powers Associates, Inc.

IV. SEQUENCE OF EVENTS

- 20-minute interview

V. PRESS

Closed press (open press at the Lasker Awards Luncheon)

VI. REMARKS

20-minute interview.

September 29, 1993

ADDRESS TO LASKER AWARDS LUNCHEON

DATE: October 1, 1993
LOCATION Pierre Hotel
TIME: 1:00 p.m.
FROM: Kim Tilley, Amanda Crumley

I. PURPOSE

To give the keynote address at the 1993 Albert Lasker Medical Research Awards Luncheon.

II. BACKGROUND

The Albert Lasker Medical Research Awards are presented annually by the Albert and Mary Lasker Foundation to recognize outstanding achievement in the medical research field. The awards were created by the President of the Lasker Foundation, Mary Woodward Lasker, and are named in honor of her late husband. The awards were created to inspire research against debilitating diseases such as cancer, heart, and neurological diseases. The three awards are the Basic Medical Research Award, the Clinical Medical Research Award, and the Albert Lasker Public Service Award. A cash prize of $25,000 comes with each of the three awards, although the number of recipients per award varies year to year. (If there is more than one recipient for a particular award, the cash prize is divided.) This year there will be one recipient for the Basic Medical Research, one for the Clinical Medical Research, and two for the Public Service Award.

History

The Albert and Mary Lasker Foundation was established in 1942 in an effort to heighten public awareness of the need for both basic and clinical research of major diseases and the need for funding of such research.

The first recipient of the Albert Lasker Medical Research Award was Colonel William C. Menninger in 1944 who was awarded for his contributions to the study of war psychiatry. Since 1944, fifty recipients of the Albert Lasker Medical Research Award have gone on to win the Nobel Prize. Past keynote speakers include Senator Tom Harkin (1991), Speaker Thomas Foley (1987), and Governor Mario Cuomo (1985).

In 1990, Mrs. Lasker discontinued the awards because she felt the awards had run their course. There was, however, such an overwhelming remonstrance from the scientific community that the awards were quickly resumed. In 1992, the awards ceremony was suspended once again upon the death of her sister, Alice Fordyce, who served as the director of the Lasker Medical Research Awards program, as well as

executive vice president of the Albert and Mary Lasker Foundation. (Ms. Fordyce traditionally presented the awards.) The award itself is a statuette replica of the "Winged Victory of Samothrace", currently located in the Louvre, which symbolizes victory over disease. It is a statute of Nike, the Greek goddess of victory, whose role was to bring news of great victory from the gods.

Mary Lasker

Mary Lasker has been the recipient of numerous awards including the Medal of Freedom, which was presented to her by Lyndon Johnson in 1969, for her efforts in health care awareness. Congress named the Mary Woodward Lasker Center for Health Research and Education at the National Institutes of Health in her honor in 1984. Also, Mrs. Lasker has visited the White House any time there has been a Democrat in office.

Although Mrs. Lasker feels that basic research into all diseases today is the key to finding cures tomorrow, her abiding interest has primarily been basic cancer research. In the early 1940's, words such as cancer and mental illness were not spoken of, and most people suffering from these diseases were sent away to "homes for incurables." This infuriated Mary Lasker, thus prompting her quest to promote basic medical research.

With the help of Reader's Digest, Mary and her husband launched a massive public awareness and fund-raising campaign in the 1940's for a group that would later become the American Cancer Society. Mrs. Lasker is now an honorary member of the board and executive committee of the American Cancer Society.

Also in the 1940's, Albert and Mary Lasker's efforts lobbying Congress and the Executive Branch paved the way for increased budgets for the National Cancer Institute and the creation of new Institutes within the NIH. Ironically, Mrs. Lasker lost her husband to colon cancer in 1952.

III. PARTICIPANTS

Between 300-350 people are expected to attend. There will be an unofficial heavy media presence.

- Mary Lasker - NOTE: Mrs. Lasker is almost 94 years old and very frail. I am told she has trouble hearing and that this might make it difficult to have an extended one on one conversation with her.
- Dr. Jordan Gutterman, Director, Albert Lasker Medical Research Awards Program
- Dr. Michael Debakey - Chairman of Awards Jury - As you know, Dr. DeBakey – the "father of heart surgery – is a cardiovascular surgeon who pioneered both aneurysm procedures the bypass surgery.
- Deeda Blair (Mrs. William McCormick Blair) - You may remember she has been generous in her contributions to the White House (i.e. she donated the

tablecloths that have been used at recent White House dinners.)
- Mr. & Mrs. Castro - attended the reception for White House restoration donors.
- 25 previous Lasker Award winners will participate in the luncheon.

Award Recipients
Dr. Gunter Blobel - Albert Lasker Basic Medical Research Award
Dr. Donald Metcalf - Albert Lasker Clinical Medical Research Award
Dr. Nancy Wexler - Albert Lasker Public Service Award
The Honorable Paul Rogers - Albert Lasker Public Service Award

IV. PRESS PLAN

Open press.

V. SEQUENCE OF EVENTS

* HRC arrives at Pierre Hotel and proceeds to reception;
* Informal meet and greet/no remarks and photo-op on the ropeline with Dr. Etienne Baulieu, inventor of RU-486;
* Official photos with 4 awardees and Mrs. Mary Lasker;
* Lunch and awards presentation;
* Dr. Gutterman opens luncheon and introduces Dr. DeBakey;
* Dr. DeBakey introduces those seated on dais;
* Dr. Gutterman makes remarks;
* Mrs. Lasker and Dr. DeBakey present awards and awardees speak;
* HRC is introduced by Dr. Gutterman;
* HRC speaks 15-20 minutes;
* Dr. DeBakey makes brief announcement and adjourns luncheon.

Seating
You will be seated between Mrs. Lasker and Dr. Jordan Gutterman. Dr. DeBakey will also be seated on the dais.

Dr. Etienne Emile Baulieu
You will meet briefly with Dr. Etienne Emile Baulieu, who is the inventor of Ru-486. Dr. Baulieu received a Lasker Clinical Medical Research Award in 1989. The French-born Dr. Baulieu was educated at Columbia University. He is very close to the Socialist government of France and is a renowned figure in public health in France. He has met several times with Ambassador Pamela Harriman.

IV. REMARKS

Lissa Muscatine.

The New York Times

February 23, 1994, Wednesday, Late Edition - Final

SECTION: Section A; Page 17; Column 1; Metropolitan Desk

LENGTH: 1401 words

HEADLINE: Mary W. Lasker, Philanthropist For Medical Research, Dies at 93

BYLINE: By ERIC PACE

BODY:

Mary Woodard Lasker, the philanthropist and champion of medical research and urban beautification, died on Monday at her home in Greenwich, Conn. She was 93 years old and also had an apartment on the East Side of Manhattan.

The cause was heart failure, said her nephew, James W. Fordyce. She made her last public appearance at a luncheon at the Pierre Hotel in October.

As a patron and volunteer lobbyist, Mrs. Lasker furthered medical researchon cancer, heart and eye diseases and in other fields. She also lent her support to beautification projects in New York and Washington that included planting trees and flowers and providing fountains and lighting. And she was a noted hostess and art collector.

In her later years she reduced her activities, but at her death she was still president of the Albert and Mary Lasker Foundation, honorary president of the American Cancer Society and a trustee and vice chairman of the United Cerebral Palsy Research and Education Foundation.

In a 1958 speech, Robert Moses, then the Parks Commissioner, said Mrs. Lasker possessed "the irresistible combination Madison Avenue dreams of -- the blend of many essences in the beautiful package."

"Intelligence, vision, generosity, charm, kindness -- Mary has them all," Moses continued.

Co-Founded Lasker Awards

Mrs. Lasker and her husband Albert Davis Lasker, a pioneer advertisingexecutive who died in 1952, established the Lasker Foundation in 1942. In almost every year since 1944, it has given Albert Lasker Awards, largely for outstanding contributions to clinical and basic medical research.

The foundation has often been quick to recognize significant new research, and its awards have great prestige. Besides supporting medical research and health programs, it has also given its backing to efforts to beautify New York and to activities in the arts.

Over the years, Mrs. Lasker also served variously as chairman of the board of the American Cancer Society, a trustee of Research to Prevent Blindness and of the Cancer Research Institute and a director of the National Committee for Mental Hygiene. She was also active in other similar organizations.

"I am opposed to heart attacks and cancer and strokes," she used to say, "the way I am opposed to sin."

In addition, Mrs. Lasker strove to persuade Federal, state and city officials and legislators to provide more funds for medical research on major killing and crippling diseases. She worked to persuade Congress to increase appropriations for the National Institutes of Health and to set up additional research centers concentrating on specific diseases.

"Without money," she said in 1985, "nothing gets done." To make sure things got done, she used to visit the White House (during Democratic Administrations, she added wryly). She also paid calls on Washington legislators, corresponded with Presidents and arranged for scientists to meet Government leaders.

'I Couldn't Cut Up a Frog'

Despite her successes in furthering medical research, Mrs. Lasker used tocontend that she lacked scientific and medical aptitude. "Nobody would have me in their laboratory for five minutes," she once said, also with a smile. "I couldn't cut up a frog, and I certainly couldn't perform surgery. I'm better at making it possible for other people."

Her passionate interest in medicine was fueled partly by illnesses of people around her and by her own health; she repeatedly had ear infections during her Wisconsin childhood.

Laskers Lead to Nobels

Over the years, the Lasker Foundation helped shape medical history byrecognizing and supporting promising research, and it has repeatedly singled out future winners of the Nobel Prize in Medicine. Fifty-one Lasker winners have become Nobel laureates.

For instance, the foundation's prize jury, whose longtime chairman is the heart surgeon Dr. Michael E. DeBakey, chose two winners of 1985 Albert Lasker Medical

Research and Public Service awards – Dr. Michael S. Brown and Dr. Joseph L. Goldstein of the University of Texas, for their studies of cholesterol chemistry in relation to the clogging of coronary arteries. They were also named Nobel Prize laureates that year.

Commenting on Mrs. Lasker's efforts, Dr. DeBakey said in a 1985 interview: "Mary Lasker is an institution unto herself. Asking what her importance has been is like asking what Harvard has meant to this country."

Throughout their history, Lasker awards have been given in every year except 1960, 1990 and 1992. In early 1990, when it was announced that no awards would be given that year, the foundation had assets of about $2.4 million, down from about $4.5 million in 1980, but an executive of the foundation said that omitting the awards, of $15,000 each, in that year "wasn't really a financial decision." Since then, the awards have been increased to $25,000 each.

'Annie Appleseed'

Like her passion for medical research, Mrs. Lasker's interest in andpatronage of urban beautification was long standing. In a 1953 column in The

New York Times, Meyer Berger referred to her affectionately as "Annie Appleseed."

Her beautification activities included furnishing funds for tulips, daffodils, begonias, chrysanthemums and other flowers at various locations in New York. Her other urban beautification projects ranged from lighted Christmas trees to 300 Japanese cherry trees donated to the United Nations.

Mrs. Lasker acquired her interest in parks and gardens during her girlhood in Watertown, Wis., where she was born to Frank Elwin Woodard, a banker, and Sara Johnson Woodard, who was a founder of two parks there.

She graduated cum laude from Radcliffe College in 1923 and studied briefly at Oxford. Then she went to work for the Reinhardt Galleries, in Manhattan, where her duties were, as she later put it, "arranging benefit loan exhibitions of outstanding old and modern French masters and selling pictures to collectors and museums."

An Art Collector

She also went on buying trips abroad and began building an art collection ofher own, which included works by Miro and Renoir. She sold most of the collection years later when she changed Manhattan homes, partly, as she said, "because I wanted to be able to give away the money."

In 1940, after leaving the art-gallery world, she married Mr. Lasker, who had achieved wealth and eminence as an advertising executive, having joined the Lord & Thomas advertising agency in 1898 and become its owner in 1908.

Two years later, he retired from active business and the Lasker Foundation was set up. In addition, drawing on his own experience in public affairs, he encouraged Mrs. Lasker to press Washington to provide more funds for research in medicine. In the decades that followed, her efforts in that direction bore many fruits.

One notable success was the National Institutes of Health in Bethesda, Md. "The N.I.H. has flowered," Dr. DeBakey recalled in the 1985 interview, "because in many ways she gave birth to it and nursed it. It was in existence, but it was she who got the funding for it."

Over the years, Mrs. Lasker also served on the boards of trustees or directors of a number of organizations and institutions, including the John F. Kennedy Center for the Performing Arts, the Museum of Modern Art, the Norton Simon Museum, New York University and Braniff Airways.

Won Presidential Medal

She was awarded the Presidential Medal of Freedom in 1969, a CongressionalGold Medal in 1989, and other honors. A Health Sciences professorship at the Harvard School of Public Health was named for her in 1989, and a new variety of pink tulip was named for her in 1985.

Mrs. Lasker's first marriage, in 1926 to Paul Reinhardt, the owner of the Reinhardt Galleries, ended in divorce in 1934.

Her sister, Alice Fordyce, was the executive vice president of the foundation and director of the Lasker Awards program. She died in 1992.

In addition to her nephew, Mr. Fordyce of Greenwich, who is a trustee of the foundation, Mrs. Lasker is survived by a stepdaughter, Frances Lasker Brody of Los Angeles; a stepson, Edward Lasker of Los Angeles; three great-nephews; five step-grandchildren, one of whom, Christopher W. Brody of Manhattan, is also a trustee of the foundation, and two step great-grandchildren.

Funeral rites and burial are to be private. A memorial service is to be held in the spring.

GRAPHIC: Photo: Mary Lasker with the heart surgeon Dr. Michael E. DeBakey in 1982. (Neal Boenzi/The New York Times)

FIRST LADY HILLARY RODHAM CLINTON
KEYNOTE ADDRESS AT THE 1993 ALBERT LASKER AWARDS LUNCHEON
OCTOBER 1, 1993
NEW YORK CITY

Thank you, Mrs. Lasker, Dr. Gutterman, Dr. DeBakey, and all of the distinguished guests gathered here for this wonderful occasion today.

I'd like to begin by offering congratulations to the winners of the Albert Lasker Awards. Dr. Blobel, Dr. Metcalf, Dr. Wexler, Congressman Rogers, you join a truly remarkable group of men and women who have helped put health care at the top of our national agenda.

Men and women who have enlightened us about the need to find cures and treatments for disease. Men and women who have helped better our health care system through public awareness and important legislation. Men and women who have been responsible for some of this century's most important breakthroughs in medical research: the discovery of penicillin as a cure for syphilis. New revelations about the structure of the DNA molecule. The development of RU-486. Advances in our understanding of the nature of the gene. And that's just to name a few.

As for the statuettes you received bearing the Greek goddess of victory, I'm glad to see that -- at least once in awhile -- Nike is immortalized as more than just a swoosh on an athletic shoe.

For me, a medical lay person and non-scientist, it is truly a privilege to be here and to participate in an event that has Albert and Mary Lasker's name attached to it. Over five decades, the Lasker name has come to embody the American ideal of good citizenship.

Vision. Intelligence. Humanity. Selflessness. These are Mary Lasker's gifts -- and fortunately for our nation, she never has ceased to share them with us.

Eleanor Roosevelt once said: "The future belongs to those who believe in the beauty of their dreams." Mrs. Roosevelt could have been talking about Albert and Mary Lasker, and Mrs. Lasker's late sister, Alice Fordyce.

We have the Laskers to thank for tulips and daffodils on Park Avenue and around this city, for azaleas and dogwoods that brighten the nation's capital, and for immeasurable contributions to education and the arts.

And of course, without Mary Lasker's energy and wisdom, our country would not lead the world today in medical -- and particularly cancer -- research.

In the past few months we have begun a great national discussion about the direction of health care in this country. It is a discussion that has involved thousands and thousands of ordinary citizens. Thousands of health care professionals. Thousands of scientists and researchers. Thousands of legislators in our states and in Congress.

For me, working on health care reform has been an extraordinary opportunity to listen to all these voices, to hear stories from people of all walks of life who know best how our system does and doesn't work.

When the President outlined his goal for health care reform some months ago, he was committed to a simple principle: to preserve and strengthen what is right, and to fix what is wrong.

While we may bring different perspectives to health care reform, I'm confident we can agree -- in general -- on what is right and what is wrong with the system today. And I think we can agree that changes must be made.

I think we can agree that every American must have comprehensive health benefits. I think we can agree that we need to control costs. That we need to ensure high quality care and reduce bureaucratic red tape. That we need to preserve individual choice of doctors and health care providers. And that we need to demand more responsibility from individuals and institutions affiliated with the health care system.

Security, simplicity, choice, savings, quality and responsibility. These are overriding principles that must be the backbone of any reform. Principles that must remain sacred as the discussion moves to the halls of Congress in the months ahead.

First, as an economic and a moral imperative, we must provide comprehensive health care benefits to every citizen -- benefits that can never be taken away. Without health security for every American, no American will be fully secure.

Second, we must simplify the system and get rid of the paperwork and forms that drown our health care professionals and discourage them from doing what they do best. And we must untangle the web of regulations that complicate not only the delivery of care in doctor's offices and hospitals -- but also the efforts of researchers and research institutions that are working toward cures and treatments we need.

Third, we must insist that Americans be allowed to choose their doctors and other health providers. This is one of the most

enduring traditions of American health care, and it cannot be sacrificed.

Fourth, we must control costs and put an end to the penny-wise, pound-foolish incentives that now rule our system. Something is wrong when you can't get covered for a mammogram but you can get covered for a mastectomy. Something is wrong when you can't get covered for a cholesterol screening but you can get reimbursed for an $80,000 bypass operation.

Something is wrong when we spend 14 percent of our national income on health care -- fueling our deficit year after year -- and our major industrial competitors are spending 8 or 9 percent and providing the same or better benefits to their citizens.

Fifth, we must protect -- and enhance -- the high quality of care that Americans have come to know. Reform will be meaningless if quality is not preserved.

Sixth, we must change our attitude about health care. Everyone must be responsible. Everyone must participate. Everyone must contribute something. No one should get a free ride.

The reason the President insists on these core principles is that, without them, the weaknesses of our system will continue to undermine its strengths.

And we cannot afford to jeopardize the things that are right with American health care -- things we have worked hard to build.

You, for example, represent what's right.

We know that medical research and high-quality health care go hand-in-hand. Your work instills your fellow citizens with optimism about the progress we can make in beating disease. It also reinforces a philosophy of preventive care that needs to be encouraged throughout this country.

We know the best way to control costs and ensure a healthier nation is to keep people free of disease. But we can't do that without emphasizing preventive medicine and without finding cures for diseases that now exact enormous economic and social tolls on our society.

I don't know much about science, certainly not enough to know the difference between opiate receptors and enkephalins [in-kef-uh-lins]. But one doesn't need to be a doctor nor a scientist to recognize the vital role of research in the race to find cures and treatments for disease.

Just in the past few years, researchers have made considerable strides in using monoclonal antibodies to help in the detection of colorectal and ovarian cancer, in discovering

likely genetic links to Lou Gehrig's disease, and in developing promising drug therapies to treat Alzheimer's and schizophrenia.

And that doesn't count Dr. Gutterman's work over the years in developing new therapies to treat cancer, or Dr. DeBakey's historic work on bypass surgery, or Dr. Blobel's pioneering research on protein production in cells, or Dr. Metcalf's discovery of CSFs [colony stimulating factors, specific white cell regulatory hormones] -- all of which ultimately contribute to shorter hospital stays, simpler treatments, and more productive lives for our citizens.

Health care reform must promote these efforts and the efforts of researchers and scientists across the country. We must continue our commitment to furthering medical science, developing new medications and technology, and thinking of new ways to improve the structure and delivery of health services.

The President's plan reflects the important role that research must play in our health care system in the years ahead. We believe that expanded investments in health research and greater support of academic health centers are critical to controlling costs, ensuring quality, and promoting a philosophy of prevention and wellness -- central goals of health care reform.

With reform, new funding will be available for prevention research and health services research.

The National Institutes of Health will expand research into a variety of areas:

* Chronic and recurrent illnesses such as Alzheimer's, cancer, cardiovascular diseases, and bone and joint diseases like osteoporosis that kill millions of Americans each year, inflict suffering on millions of others, and cost billions of dollars in treatment, hospital stays and lost productivity.

* Child health, including perinatal health, birth defects and cognitive development.

* Reproductive health, including sexually transmitted diseases, adolescent pregnancy and pregnancy-related complications.

* Mental health and substance abuse

* Infectious diseases, focusing on vaccine development and research, particularly for new and emerging diseases such as AIDS.

* Health and wellness promotion.

At the same time, the President's plan will promote research services that will help answer important questions about the effectiveness of treatments and patient outcomes. This will be useful to doctors and hospitals -- as well as academic health centers and research institutions training future doctors and scientists.

Our research institutions are centers of excellence whose integrity and importance are reflected in the President's plan. Health care reform will help academic health centers defray the institutional costs of research, development of new technology and treatment of rare and severe illnesses.

And while it is important that academic health centers prepare more students for careers as primary care physicians, they must not be discouraged from continuing to train the researchers and scientists of tomorrow.

Disease is a frightening and expensive enemy. Yet through the work of people like those honored here today, we are reminded of how much progress can be made in combatting illnesses that we never even knew existed decades ago.

In the coming months, our nation will take on another frightening and expensive adversary -- a health care system that has raged out of control for several decades.

For too long, we have allowed the ills of our system to inject unnecessary fear in the lives of millions of Americans . . . to eat away at our nation's social fabric . . . to reduce our productivity . . . to drain our federal and state budgets . . . and to threaten our economic and political standing in the world.

Now is our time, our chance to enhance the health of individual Americans and protect the health of our nation. If we can find a vaccine for polio . . . if we can discover the structure of the DNA molecule . . . if we can begin to understand the nature of the gene . . . surely we can fix a health care system that is broken.

I hope that in the months ahead, you will share with us the same sense of purpose, the same commitment to bettering humanity that you show in your labs and classrooms and research centers every day. If we all join together, I'm confident our nation can finally achieve, lasting health care reform that is long overdue.

Thank you very much.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release October 1, 1993

REMARKS BY THE FIRST LADY
AT LASKER AWARDS, NEW YORK, NEW YORK

MRS. CLINTON: Thank you. Thank you very much (inaudible) for that extraordinary introduction. There are few comparisons that do me more honor than to be compared to Mrs. Lasker, in any way at all. I don't consider myself worthy of that, but it is a standard to which all of us should aspire, and I'm very appreciative.

This is an extraordinary gathering. I know that, because the very first time I heard about the Lasker lunch was from my friend, Eppie Lederer, who told me that it was the most wonderful gathering that she had ever had anything to do with, and she would never miss it.

When the invitation came for me to be part of this, I immediately thought of what Eppie had told me once before, and said yes. I thought at the time that we might need to publicize health care reform. (Laughter.)

I think, very (inaudible), this is like parsley on the plate at dinner. It's not necessary, but it still is a nice thing to do. So for me particularly, it is an honor to be here.

I would like to begin by offering my congratulations to the winners of the Albert Lasker awards -- to Dr. Vogle (phonetic) and Dr. Metcalf (phonetic), whose work has moved us forward into that future that we all look forward to being part of, where disease and its ravages are pushed back even further; to Congressman Rogers, who has been a consistent voice for health care reform and who has been part of the meetings that I have held over the last many months; and to Dr. Wexler (phonetic), whose personal commitment is matched by her professional accomplishments.

These winners join the remarkable group of men and women who have over the decades put health care at the top of our national agenda, men and women whose work has found cures

for disease, who have aided the kind of breakthroughs that we've only been able to dream about in the past but now take for granted, men and women who have helped better our health care system through public awareness and through important legislation.

It is very exciting for me to be a part of what all of you represent. This is a time when the past and the present in medical research join together to point us to a new future, and it is one that I think all of us have a responsibility and an obligation to help shape.

For me as a lay person and non-scientist, it is always a little daunting to read about the accomplishments of those of you who are making breakthroughs, but it is also very encouraging that you are all here and your work is being supported by a woman who represents the ideal of American citizenship, to me -- a woman whose vision and intelligence, humanity, selflessness, have really been gifts to the entire nation.

Mary Lasker has brought to medical research and health awareness a rare combination of gifts. But what I particularly appreciate is not only her willingness to share those gifts with us but to recognize that it is only through persistence -- whether it be 25 years, Dr. Metcalf or, more than half a century in Mrs. Lasker's case, that real change comes about and takes root.

Eleanor Roosevelt once said that the future belongs to those who believe in the beauty of their dreams. She could have been talking about Mary Lasker and about Mrs. Lasker's late sister, Alice Fordyce (phonetic), whose family is here today.

But you know, I also want to thank Mrs. Lasker for the tulips and daffodils on Park Avenue, and around this city; I want to thank her for the azaleas and the dogwoods that brighten the nation's capital; and, I just learned from James Fordyce, I want to thank her for the rose garden at Modlin (phonetic) College at Oxford, because she had understood better than most of us ever do that the work that takes place in our laboratories, the kind of painstaking clinical research that we honor today, the work that takes place in the halls of Congress, are all devoted to enhancing life, to beautifying it around us, to inspiring all of us to live up to our God-given potentials.

So she brings, indeed, rare gifts that I hope will

inspire us, as we go through, in the next few months, this great national discussion about the direction of health care in our country. It is a discussion that needs to involve all of us: scientists in laboratories; great doctors, like Dr. De Bakey; citizens, business leaders, all of us. We all need to be part of charting our nation's destiny when it comes to our health care system.

The President has set goals, and they are goals that I think finally all of us can agree on, even if we do not agree on all the particulars as to how to achieve them. they are premised on a very simple conviction: that we have the finest-quality medical system in the world, but it is not available to us, and that what we must do is to preserve what is right about our system and to fix what is wrong.

If we agree that we are starting from a position of strength that we wish to make stronger, if we agree that what we need to be guided by are the six principles of security and quality and choice and simplicity and savings and responsibility, then I agree with the President that we can work out the details along the way. We have to assure every American comprehensive health benefits. That has to be the end result of whatever legislation is passed and signed into law. We cannot compromise on that.

In fact, earlier, Dr. Wexler pointed out to me something that just stunned me in its brilliance and its sweep. She said that, because of the work currently being done on the human gene project, it is likely in the next years every one of us will have a pre-existing condition and be uninsurable. I want you to think about that. That is a stunning and, as I said, brilliant revelation.

Dr. Wexler is uninsurable, should she move from her current clinical and professorial position, because of a pre-existing condition rooted in a gene. What will happen as we -- as we will -- discover those genes that control for breast cancer or prostate cancer or osteoporosis or any of the other thousands of conditions that affect us as human beings? Under our current system, more and more of us will be left out of the health care insurance market.

That, if nothing else, should make all of us willing to go to the end of the road together, to make sure every American has the basic right to health security. Either that, or you better slow down the genetic research that you're doing so that we don't get left out in the cold in the current insurance market. (Laughter.)

I don't think that will happen. I think we will resolve that every one of us should be secure. We will also resolve that we must have a system that simplifies the financing and paperwork attendant upon delivering health care, which drowns our professionals and discourages them from doing what they have been trained to do, which wraps the delivery of health care in a web of regulations and complications that have no place in the doctor-patient relationship.

We know we can do better and we have seen examples of how we can move toward electronic billing, toward a single form, toward eliminating a lot of the unnecessary cost that just drives the health care system to become more and more loaded down with bureaucracy and administration.

Thirdly, we do have to insist that we retain choice in this system so that individuals will feel that they have some control over their health care destiny. If we do nothing, the choices that are currently available will continue to narrow. More and more choices as to who your providers are and what treatments you are entitled to will be determined by bottom-line cost as to how much insurance is costing a business and insurance companies will more and more determine who you can see and how much you will have to pay.

We also have to get savings from our system. This is an area that is certainly one of the most challenging and, in some respects, controversial, in the President's proposal. But as I look around this room and I see what we have accomplished through the work of many of you who run some of our major teaching hospitals or cancer centers, who have been part of breakthrough drugs coming into the market and making it cheaper and better for people to get treatment, when I look at how care is delivered more efficiently at high quality in some parts of our country because of the way doctors and hospitals are organized, I know we can do this.

It will mean changing some of the ways in which things have been done before, but it is just defying common sense for us not to commit ourselves to getting the kind of efficiencies in our system we know are there, which will not undermine quality but, instead, enhance it.

I have said several times over the past three days, we have too many examples of what we know works and what we know can be done to deliver high-quality care. What we don't have are incentives in our current system that will motivate people to choose those alternatives over just doing it the

way we have done it -- a piecework approach to reimbursing physicians and others. That can no longer be sustained financially or in respect to the human cost that it unfortunately creates.

Something is wrong when we spend 14 percent of our national income on health care when our major competitors and other nations around the world, from Australia to Canada to Germany to Japan, take care of all of their citizens, have higher outcomes on all kinds of national indices of public health, and spend only 8 or 9 percent of their national income. We know that we can do better than we are doing.

As you know in this room, if we do everything and do not protect and enhance quality, we will not have moved forward. Therefore, it will be meaningless, if quality is not preserved. We are working very closely with the academic health centers of this country, some of whom are represented in this room, to make sure that they become the quality foundation of what we are attempting to do in health care reform. I am very grateful to the deans of a number of our leading medical schools and to the heads of a number of our national cancer centers for being part of our efforts to ensure and, in fact, enhance the roles that they will play in the future.

Finally, we do have to change our attitudes about health care. We need to instill more of a sense of responsibility at all levels -- at the individual level where we be come more responsible for our own health; at the community and public health level where we take on the plagues of violence, teenage pregnancy, AIDS, drug abuse, that drive our costs up at both horrific human and economic tolls. Everyone has to contribute. Everyone has to take responsibility.

These core principles will guide us to a strengthened health care system without undermining what is right within it. We know that medical research and high-quality health care go hand-in-hand. Your work represents that kind of partnership. It reinforces the optimism and hopefulness that Dr. Gutterman (phonetic) referred to. It also reinforces a philosophy of preventive care, of trying to cure, not merely treat.

We know that without emphasizing medical research, we cannot have a health care system that will give us the kind of health care we want to have as a nation. So to that end, we are going to be strengthening our commitment as a

nation to health care research. We are going to be asking for more funding and we're going to be looking for a firmer funding foundation, a stream of funding, that will match the kind of personal commitment that Mrs. Lasker has made over all of these years. (Applause.)

Now, we are doing that because we believe that expanded investments in health research and greater support of academic health centers are critical to not only ensuring quality but controlling costs and promoting a philosophy of prevention and wellness. With reform, new funding will be available for prevention research and health services research.

The National Institutes of Health will be asked to expand research into a variety of areas: common and recurrent illnesses, such as Alzheimer's, cancer, cardiovascular diseases, and bone and joint diseases like osteoporosis, that kill millions of Americans each year, inflict suffering on millions of others, and cost billions of dollars in treatment, hospital stays, and lost productivity; children's health, including perinatal health, birth defects, and cognitive development; reproductive health, including sexually-transmitted diseases, adolescent pregnancy, and pregnancy-related complications; mental health and substance abuse.

I want to say just an additional word about those two. In the comprehensive benefits package that the President's plan will propose, we include mental health benefits and substance abuse treatment, not to the extent that we would have liked but to the extent that we feel we can afford in order to have it firmly rooted in our health care system.

I would predict that, among the many struggles we will have, one will be over whether we will retain mental health benefits and substance abuse treatment. I hope those of you whose research or work has touched in either of these areas will stand with us for the very firm belief that, without treating mental health, without treating substance abuse, we are not going to have true health care reform. Those are diseases and those are conditions that undermine physical health in ways that we must address now, and we will need your support (inaudible) -- (Applause.)

We will also focus more attention and resources on infectious diseases, focusing on vaccine development and research, particularly for new and emergent diseases and

variations on diseases, such as AIDS and any variation that is on the horizon. We also want to focus on health and wellness promotion, and then, hand-in-hand with the human gene project, genetic diseases.

At the same time, the President's plan will promote research services that will help answer important questions about the effectiveness of treatment and patient outcomes. This will be very useful to doctors and hospitals as well as academic health centers and research institutions training future doctors and scientists.

As I have said repeatedly over the last three days, we know that different operations cost different amounts of money in different regions of the same state and in different regions of our country, without differences in quality outcome. We have to begin focusing more research on these kinds of differentials and publicizing that information among the medical and research communities.

As I have pointed out, the state of Pennsylvania has kept records about cardiac bypass surgery, among other operations. Hospitals charge between $21,000 and $84,000 for the same operation. There has been no recorded difference in quality outcome. In fact, with respect to mortality, the operations that cost closer to $21,000 are as good or better than some of those performed in hospitals that charge closer to $84,000.

If there are ways we can begin to change practice styles and decision-making among physicians so that the information that we will have available can be better utilized, I would argue we will be enhancing quality. We can afford in our country to provide more cardiac bypass surgery at high quality if the cost is closer to $21,000 than we can if it is closer to $84,000. But that information has to be well researched, well publicized, and then implemented.

As we move forward, we want particularly to emphasize the roll that the academic health center will play in getting that kind of quality information out into clinical practice. And, if the academic health centers serve as what we are calling the quality foundation for health care reform, we will not need to be reinventing the wheel or creating any new bureaucracy but, for the first time, better coordinating the information we have available and better disseminating it so it can be acted upon.

This will be an extraordinary challenge in the next

months for all of us because we will be taking on an issue that has defied resolution over many years. It is one about which all of us have strong feelings based on personal and/or professional experience.

But for too long we have refused to deal with what every one of us in this room knows are the problems in our health care system. We have allowed the ills of our system to inject unnecessary fear in the lives of millions of Americans, to eat away at our nation's social fabric, to reduce our productivity, to drain our federal and state budgets, to undermine physician and scientific independence and autonomy in decision-making, and to threaten our economic and political standing in the world.

Now is our time -- our time to enhance the health of individuals Americans and protect the integrity of our entire health care system. If we can find a vaccine for polio, if we can discover the structure of DNA, if we can begin to understand the nature of the gene, surely we can make the political decisions necessary to fix and treat a health care system badly in need of it. I hope that you will share with us the same sense of purpose, the same commitment to bettering humanity that we have shown in labs and classrooms and operating rooms and research centers every day over many years.

I am absolutely confident we can meet this challenge if all of us decide we are up to it, work together, and have the kind of hope and faith in the future that motivated Mary Lasker. When nobody was paying attention to her, when nobody would listen to her, she never gave up, and we can't either. That is the tribute she deserves from us.

Thank you all very much. (Applause.)

* * * * *

ALBERT AND MARY LASKER FOUNDATION

MARY WOODARD LASKER

A Brief Biography (written in 1993)

For more than 40 years, Mary Woodard Lasker has brought her relentless determination and energy to the fight to conquer the major killing and crippling diseases of our time. She has devoted a lifetime to encouraging Federal and state recognition of medical research in cancer, cardiovascular disease, mental illness, arthritis, neurological diseases and blindness. And equally important, she has worked tirelessly for increased private and governmental support for such research.

As President of the Foundation which she established with her late husband, Albert D. Lasker, Mrs. Lasker has played a key role in influencing the course of medical research in America by urging increased funding for medical research to prolong the prime of life.

The Albert and Mary Lasker Foundation's renowned annual Albert Lasker Awards for outstanding contributions to medical research and in Public Service are today among the most coveted American honors for scientific achievement and public health advances.

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In addition to her singleminded dedication to improved health care for Americans, Mrs. Lasker has been a leading proponent of urban beautification and has funded hundreds of tree- and bulb-planting projects in New York City and Washington, D.C. In 1985, a new variety of pink tulip was named in her honor.

EARLY YEARS

Mary Woodard Lasker was born in Watertown, Wisconsin, the elder of two daughters of Frank Elwin and Sara Johnson Woodard. Mrs. Lasker first attended the University of Wisconsin, then Radcliffe College where she graduated cum laude with a B.A. degree. Later, she took post-graduate studies at Oxford University, England.

Her first marriage, in 1926 to art gallery owner Paul Reinhardt, ended in divorce. In 1940, she married Albert Davis Lasker, advertising pioneer and owner of the famed advertising agency, Lord and Thomas.

THE LASKER FOUNDATION IS ESTABLISHED

In 1942, she and Mr. Lasker established the Albert and Mary Lasker Foundation to raise public awareness about major killing and crippling diseases and the urgent need for

Mary Woodard Lasker: A Brief Biography...3/

increased research funding to conquer them. Her sister, Mrs. Alice Fordyce, is Executive Vice President of the Foundation and Director of the Albert Lasker Medical Research Awards Program.

In 1944, they presented the first Albert Lasker Medical Research Awards to encourage and honor physicians and scientists for outstanding achievements in medical research and public health administration. The first Award recipient was Col. William C. Menninger for his work during World War II in mental health and War Psychiatry.

In the years since, the Lasker Awards have achieved international pre-eminence, and 49 Lasker Award winners have later won the Nobel Prize.

A NATIONAL HEALTH POLICY TAKES SHAPE

In the 1940's, the Laskers played a central role in encouraging increased funding for basic cancer research. Among their first efforts was a public awareness campaign on behalf of the group which was later to be reorganized as the American Cancer Society. Later, the Laskers were vigorous in encouraging Congress and the Executive Branch to mount an unprecedented national government-sponsored research effort for all medical sciences. This effort not only expanded the scope and budget of the National Cancer Institute but ultimately resulted in the creation of new Institutes within

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the National Institutes of Health.

MARY LASKER WINS MEDAL OF FREEDOM

Although Mr. Lasker died of cancer in 1952, Mary Lasker, undaunted in her quest to conquer disease, redoubled her efforts and carried on alone. In 1969, President Lyndon B. Johnson presented her with the Medal of Freedom, the highest national award given to a private citizen, for her tireless work in improving Americans' health care. Mrs. Lasker was a vigorous proponent of the historic National Cancer Act which in 1971 launched the United States' War on Cancer.

In 1984, Congress named a new center, the Mary Woodard Lasker Center for Health Research and Education at the National Institutes of Health, in her honor.

GUIDING FORCE FOR MANY ORGANIZATIONS

In addition to serving as president of the Albert and Mary Lasker Foundation, Mrs. Lasker is an honorary member of the board and executive committee of the American Cancer Society, chairman of the National Health Education Committee, vice-president of the Research to Prevent Blindness Committee, and trustee and vice-chairman of the board of the United Cerebral Palsy Research and Education Foundation.

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Under her guidance, the Lasker Foundation produced "Killers and Cripplers," a handbook on illness and disease for Congress and the lay public. Since 1969, four editions of this widely used guide have been published with a fifth scheduled for publication in 1987.

In 1973, Mrs. Lasker organized physicians and laymen into a new national committee with a New York chapter, "Citizens for the Treatment of High Blood Pressure" -- an effort which contributed to a 40% reduction in the number of deaths from high blood pressure in New York State alone.

From 1980 to 1984, she was a member of the advisory committee to the Director of the National Institutes of Health.

LEGENDARY PASSION FOR FLOWERS

Mary Lasker is also legendary for her passion for environmental beautification. As early as 1943, she began brightening New York City's bleak parks and streets with colorful winter-hardy chrysanthemums. In 1956, she created 20 blocks of tulips and daffodils on Park Avenue -- an effort which has resulted in the planting of millions of flowers, shrubs and trees by the City and private individuals.

Through the Society for a More Beautiful National Capital, Mrs. Lasker contributed numerous plantings,

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including 10,000 azalea bushes along Pennsylvania Avenue, 900 flowering trees on Hains Point, 2,500 dogwood trees in Lady Bird Johnson Park, and more than 1,210,000 daffodil bulbs for Rock Creek Park, in Lady Bird Johnson Park and Potomac Parkway, and a jet fountain at the tip of Hains Point.

Mrs. Lasker has a distinguished collection of artwork including watercolors and drawings by Picasso, Matisse, Chagall, Dufy, Dali, Utrillo, Gottlieb, Sam Francis, Mathieu, Okada, Jenkins, Stamos, and pieces of early Greek and Roman sculpture.

MARY LASKER AWARDED CONGRESSIONAL GOLD MEDAL

In April 1989, President Bush presented to Mrs. Lasker on behalf of the Congress, a special Congressional Gold Medal for her humanitarian contributions in the areas of medical research and education, urban beautification, and the fine arts.

MARY WOODARD LASKER PROFESSORSHIP

The Mary Woodard Lasker Professorship of Health Sciences was established at the Harvard School of Public Health in 1989 to perpetuate Mrs. Lasker's life's crusade for the discovery of new knowledge to promote health.

AWARDS AND HONORARY DEGREES

Mrs. Lasker holds honorary degrees from the Albert Einstein College of Medicine of Yeshiva University, University of Wisconsin, Bard College, University of Southern California,

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Women's Medical College of Pennsylvania, New York University, New York Medical College, Jefferson College of Philadelphia, Columbia University and the University of California at Berkeley. Radcliffe has given her its highest honor, the Radcliffe Achievement Award. In 1987 she received a Doctor of Humanities Degree from Harvard University.

Mrs. Lasker is a member of the French Legion of Honor and has received the Cross of the Officer of the Legion of Honor. She is also listed in "Who's Who."

She is the recipient of:

The John H. Finley Medal from City College of New York;

The Gold Heart Award of the American Heart Association;

Mayor Wagner's Award for Distinguished and Special Service to the City of New York;

The Weizmann Award of the American Committee for the Weizmann Institute of Science;

The Heart of Gold Citation of the New York Heart Association;

The Municipal Art Society Award;

The Edward R. Loveland Memorial Award of the American College of Physicians;

The Medallion Award of the Foundation for Research on the 50th Anniversary of the Osteopathic Society of the City of New York (1960);

The 1966 Arthritis Foundation Award;

The 1966 Annual Special Award of the Horticultural Society of New York;

The 1966 New York State Award of the New York State Council of the Arts;

The 1967 Gold Heart Award of the International Cardiology Foundation;

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The 1968 Distinguished Service Award of the American College of Cardiology;

The Sidney Farber Gold Medal of the Children's Cancer Research Foundation (1969);

The "Founders Award" and the Alfred Sloan Award from the American Cancer Society's New York City Division (1971);

The 1973 Ladies Home Journal Women of the Year Award;

Award from Memorial Hospital (1973);

The 1973 Albert Gallatin Associates Award (New York University);

The 1974 James Ewing Society's Cancer Award;

Lifeline Award of the American Health Foundation (1974);

The 1976 United Cerebral Palsy Humanitarian Award;

The Cancer Research Institute's William B. Cooley Award (1977);

The 1977 World Rehabilitation Fund Award;

The National Heart, Lung & Blood Institute Advisory Council's First Distinguished Service Award (1978);

The 1980 Hubert Humphrey Award from Boston University School of Medicine;

The 1980 Distinguished Public Service Award from the American Academy of Opthalmology;

The 1982 Lord & Taylor Rose Award;

The first Nathan S. Kline Medal of Merit from the Nathan S. Kline Institute for Psychiatric Research (1983);

The Central Park Conservancy's Frederick Law Olmsted Award (1984);

The American Tentative Society's Rennie Taylor Award (1985);

The 1985 "Flame of Hope" Award from the Terri Gotthelf Lupus Research Institute;

The 1985 Edwin C. Whitehead Award of the National Center for Health Education;

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The 1985 "Woman of Distinction" Award from Birmingham Southern College;

The Endocrine Society's Endocrine Award (1985);

In 1986, the first recipient of the New York Lung Association's Quality of Life Award;

The Patriot's Award from the Congressional Medal of Honor Society in 1986;

The first woman to receive the Vision Award from the Luminaires of the Estelle Doheny Eye Foundation (1986);

The first Giovanni Lorenzini Foundation Prize for the Advancement of Biomedical Science from the Giovanni Lorenzini Foundation, Inc., in 1987;

The 1987 Mayor's Award of Honor for Science and Technology, presented by Mayor Edward I. Koch;

The 1987 Dorothea Dix Award from the Mental Illness Foundation;

The 1987 Award from the Federation of American Societies for Experimental Biology;

The 1987 Walsh McDermott Award from the Associated Medical Schools of New York;

The National Cancer Institute's Year 2000 Award (1987);

A Franklin D. Roosevelt Freedom Award from the Franklin and Eleanor Roosevelt Institute (1987);

The 1987 Susan G. Komen Foundation Award for Excellence in Public Service;

A 1987 Charles A. Dana Foundation Award for Pioneering Achievements in Health and Higher Education;

The first Gold Medal Award for International Achievement in Medical Research from the National Foundation for Ileitus and Colitis (1987);

A 1988 Parks Council Award;

Winner of one of the first annual Caring Awards from the Caring Institute (1988);

The American Federation for Clinical Research's "Distinguished Friend of Medical Research Award" (1989);

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A 1989 Lifetime Public Service and Humanitarian Award from the Institute for Advanced Studies in Immunology and Aging;

The 1989 Street Trees Award from the New York City Street Tree Consortium, Inc.;

The Brain Research Foundation's 1990 Creativity Award;

Inducted into the Health Care Hall of Fame (1990);

The Dean's Award from the College of Physicians & Surgeons of Columbia University (1990);

The 1990 Medal for Distinguished Achievement from the American Society of the French Legion of Honor (given only to a former recipient of the French Government's Legion of Honor Award).

Over the years Mrs. Lasker has served in various trustee and board positions for a range of health and cultural organizations and educational institutions including:

Society for a More Beautiful National Capital
Planned Parenthood Federation of America
National Advisory Heart Council of the National Heart Institute
National Committee Against Mental Illness
Health Insurance Plan of Greater New York
The New York Foundation
The Museum of Modern Art
New York University
The Norton Simon Museum
The Lyndon Baines Johnson Foundation
National Cancer Advisory Board
Cancer Research Institute
John F. Kennedy Center for the Performing Arts
Leeds Castle Foundation
American Cancer Society
Advisory Committee to the Director of the National Institutes of Health
United Cerebral Palsy Research and Education Foundation
Research to Prevent Blindness, Inc.

To: Lissa
Fr: Liz

September 24, 1994

PHONE IN INTERVIEW FOR MARY WOODARD LASKER VIDEO TRIBUTE

DATE:	**Monday, September 26**
TIME:	**2:30 pm**
LOCATION:	**HRC's office**
FROM:	**Liz Bowyer**

I. PURPOSE

To do a 20-minute interview for a video tribute to Mary Lasker.

II. BACKGROUND

The Lasker Foundation is developing a 5-minute video tribute to Mary Lasker to be shown at this year's Lasker Medical Research Awards Luncheon on September 30th. The video will feature voice-overs of some of Mrs. Lasker's closest friends talking about their personal recollections of Mrs. Lasker and her contributions to American health care and medical research. The taped interviews will be edited and made into shortened voice-overs for the video.

The Foundation has asked you, Eppie Lederer, Lady Bird Johnson, Dr. Jordan Gutterman, who directs the Lasker Foundation Awards program; James Fordyce, Mrs. Lasker's nephew; and Dr. Michael Debakey, who has chaired the Awards jury for many years, to participate.

The Lasker Foundation would like the interviews to be as relaxed and unrehearsed as possible. Sharon Powers, President of Brown and Powers Associates (the Lasker Foundation's PR agency), will conduct your phone-in interview. She will ask you a series of questions relating to the following subjects:

- The lessons Americans might learn from Mary Lasker's life and accomplishments.
- The value in American society that the Lasker Awards have served.
- The ways that Mary Lasker was a role model of citizen activism in our country.
- A summation of her special contribution to American health and quality of life.
- Words and concepts that come to mind when you ponder Mrs. Lasker and the

impact of the Lasker Awards.

- The loss we as a nation have with her passing.
- Ways we as Americans can take up the standard she carried for 50 years.

III. PARTICIPANTS

HRC
Sandra Powers, President of Brown and Powers Associates, Inc.

IV. SEQUENCE OF EVENTS

- 20-minute interview

V. PRESS

Closed press (open press at the Lasker Awards Luncheon)

VI. REMARKS

20-minute interview.

September 29, 1993

ADDRESS TO LASKER AWARDS LUNCHEON

DATE: October 1, 1993
LOCATION Pierre Hotel
TIME: 1:00 p.m.
FROM: Kim Tilley, Amanda Crumley

I. PURPOSE

To give the keynote address at the 1993 Albert Lasker Medical Research Awards Luncheon.

II. BACKGROUND

The Albert Lasker Medical Research Awards are presented annually by the Albert and Mary Lasker Foundation to recognize outstanding achievement in the medical research field. The awards were created by the President of the Lasker Foundation, Mary Woodward Lasker, and are named in honor of her late husband. The awards were created to inspire research against debilitating diseases such as cancer, heart, and neurological diseases. The three awards are the Basic Medical Research Award, the Clinical Medical Research Award, and the Albert Lasker Public Service Award. A cash prize of $25,000 comes with each of the three awards, although the number of recipients per award varies year to year. (If there is more than one recipient for a particular award, the cash prize is divided.) This year there will be one recipient for the Basic Medical Research, one for the Clinical Medical Research, and two for the Public Service Award.

History

The Albert and Mary Lasker Foundation was established in 1942 in an effort to heighten public awareness of the need for both basic and clinical research of major diseases and the need for funding of such research.

The first recipient of the Albert Lasker Medical Research Award was Colonel William C. Menninger in 1944 who was awarded for his contributions to the study of war psychiatry. Since 1944, fifty recipients of the Albert Lasker Medical Research Award have gone on to win the Nobel Prize. Past keynote speakers include Senator Tom Harkin (1991), Speaker Thomas Foley (1987), and Governor Mario Cuomo (1985).

In 1990, Mrs. Lasker discontinued the awards because she felt the awards had run their course. There was, however, such an overwhelming remonstrance from the scientific community that the awards were quickly resumed. In 1992, the awards ceremony was suspended once again upon the death of her sister, Alice Fordyce, who served as the director of the Lasker Medical Research Awards program, as well as

executive vice president of the Albert and Mary Lasker Foundation. (Ms. Fordyce traditionally presented the awards.) The award itself is a statuette replica of the "Winged Victory of Samothrace", currently located in the Louvre, which symbolizes victory over disease. It is a statute of Nike, the Greek goddess of victory, whose role was to bring news of great victory from the gods.

Mary Lasker

Mary Lasker has been the recipient of numerous awards including the Medal of Freedom, which was presented to her by Lyndon Johnson in 1969, for her efforts in health care awareness. Congress named the Mary Woodward Lasker Center for Health Research and Education at the National Institutes of Health in her honor in 1984. Also, Mrs. Lasker has visited the White House any time there has been a Democrat in office.

Although Mrs. Lasker feels that basic research into all diseases today is the key to finding cures tomorrow, her abiding interest has primarily been basic cancer research. In the early 1940's, words such as cancer and mental illness were not spoken of, and most people suffering from these diseases were sent away to "homes for incurables." This infuriated Mary Lasker, thus prompting her quest to promote basic medical research.

With the help of Reader's Digest, Mary and her husband launched a massive public awareness and fund-raising campaign in the 1940's for a group that would later become the American Cancer Society. Mrs. Lasker is now an honorary member of the board and executive committee of the American Cancer Society.

Also in the 1940's, Albert and Mary Lasker's efforts lobbying Congress and the Executive Branch paved the way for increased budgets for the National Cancer Institute and the creation of new Institutes within the NIH. Ironically, Mrs. Lasker lost her husband to colon cancer in 1952.

III. PARTICIPANTS

Between 300-350 people are expected to attend. There will be an unofficial heavy media presence.

- Mary Lasker - NOTE: Mrs. Lasker is almost 94 years old and very frail. I am told she has trouble hearing and that this might make it difficult to have an extended one on one conversation with her.
- Dr. Jordan Gutterman, Director, Albert Lasker Medical Research Awards Program
- Dr. Michael Debakey - Chairman of Awards Jury - As you know, Dr. DeBakey -- the "father of heart surgery -- is a cardiovascular surgeon who pioneered both aneurysm procedures the bypass surgery.
- Deeda Blair (Mrs. William McCormick Blair) - You may remember she has been generous in her contributions to the White House (i.e. she donated the

tablecloths that have been used at recent White House dinners.)

- Mr. & Mrs. Castro - attended the reception for White House restoration donors.
- 25 previous Lasker Award winners will participate in the luncheon.

Award Recipients

Dr. Gunter Blobel - Albert Lasker Basic Medical Research Award
Dr. Donald Metcalf - Albert Lasker Clinical Medical Research Award
Dr. Nancy Wexler - Albert Lasker Public Service Award
The Honorable Paul Rogers - Albert Lasker Public Service Award

IV. PRESS PLAN

Open press.

V. SEQUENCE OF EVENTS

* HRC arrives at Pierre Hotel and proceeds to reception;
* Informal meet and greet/no remarks and photo-op on the ropeline with Dr. Etienne Baulieu, inventor of RU-486;
* Official photos with 4 awardees and Mrs. Mary Lasker;
* Lunch and awards presentation;
* Dr. Gutterman opens luncheon and introduces Dr. DeBakey;
* Dr. DeBakey introduces those seated on dais;
* Dr. Gutterman makes remarks;
* Mrs. Lasker and Dr. DeBakey present awards and awardees speak;
* HRC is introduced by Dr. Gutterman;
* HRC speaks 15-20 minutes;
* Dr. DeBakey makes brief announcement and adjourns luncheon.

Seating

You will be seated between Mrs. Lasker and Dr. Jordan Gutterman. Dr. DeBakey will also be seated on the dais.

Dr. Etienne Emile Baulieu

You will meet briefly with Dr. Etienne Emile Baulieu, who is the inventor of Ru-486. Dr. Baulieu received a Lasker Clinical Medical Research Award in 1989. The French-born Dr. Baulieu was educated at Columbia University. He is very close to the Socialist government of France and is a renowned figure in public health in France. He has met several times with Ambassador Pamela Harriman.

IV. REMARKS

Lissa Muscatine.

The New York Times

February 23, 1994, Wednesday, Late Edition - Final

SECTION: Section A; Page 17; Column 1; Metropolitan Desk

LENGTH: 1401 words

HEADLINE: Mary W. Lasker, Philanthropist For Medical Research, Dies at 93

BYLINE: By ERIC PACE

BODY:

Mary Woodard Lasker, the philanthropist and champion of medical research and urban beautification, died on Monday at her home in Greenwich, Conn. She was 93 years old and also had an apartment on the East Side of Manhattan.

The cause was heart failure, said her nephew, James W. Fordyce. She made her last public appearance at a luncheon at the Pierre Hotel in October.

As a patron and volunteer lobbyist, Mrs. Lasker furthered medical researchon cancer, heart and eye diseases and in other fields. She also lent her support to beautification projects in New York and Washington that included planting trees and flowers and providing fountains and lighting. And she was a noted hostess and art collector.

In her later years she reduced her activities, but at her death she was still president of the Albert and Mary Lasker Foundation, honorary president of the American Cancer Society and a trustee and vice chairman of the United Cerebral Palsy Research and Education Foundation.

In a 1958 speech, Robert Moses, then the Parks Commissioner, said Mrs. Lasker possessed "the irresistible combination Madison Avenue dreams of -- the blend of many essences in the beautiful package."

"Intelligence, vision, generosity, charm, kindness -- Mary has them all," Moses continued.

Co-Founded Lasker Awards

Mrs. Lasker and her husband Albert Davis Lasker, a pioneer advertisingexecutive who died in 1952, established the Lasker Foundation in 1942. In almost every year since 1944, it has given Albert Lasker Awards, largely for outstanding contributions to clinical and basic medical research.

The foundation has often been quick to recognize significant new research, and its awards have great prestige. Besides supporting medical research and health programs, it has also given its backing to efforts to beautify New York and to activities in the arts.

Over the years, Mrs. Lasker also served variously as chairman of the board of the American Cancer Society, a trustee of Research to Prevent Blindness and of the Cancer Research Institute and a director of the National Committee for Mental Hygiene. She was also active in other similar organizations.

"I am opposed to heart attacks and cancer and strokes," she used to say, "the way I am opposed to sin."

In addition, Mrs. Lasker strove to persuade Federal, state and city officials and legislators to provide more funds for medical research on major killing and crippling diseases. She worked to persuade Congress to increase appropriations for the National Institutes of Health and to set up additional research centers concentrating on specific diseases.

"Without money," she said in 1985, "nothing gets done." To make sure things got done, she used to visit the White House (during Democratic Administrations, she added wryly). She also paid calls on Washington legislators, corresponded with Presidents and arranged for scientists to meet Government leaders.

'I Couldn't Cut Up a Frog'

Despite her successes in furthering medical research, Mrs. Lasker used tocontend that she lacked scientific and medical aptitude. "Nobody would have me in their laboratory for five minutes," she once said, also with a smile. "I couldn't cut up a frog, and I certainly couldn't perform surgery. I'm better at making it possible for other people."

Her passionate interest in medicine was fueled partly by illnesses of people around her and by her own health; she repeatedly had ear infections during her Wisconsin childhood.

Laskers Lead to Nobels

Over the years, the Lasker Foundation helped shape medical history byrecognizing and supporting promising research, and it has repeatedly singled out future winners of the Nobel Prize in Medicine. Fifty-one Lasker winners have become Nobel laureates.

For instance, the foundation's prize jury, whose longtime chairman is the heart surgeon Dr. Michael E. DeBakey, chose two winners of 1985 Albert Lasker Medical

Research and Public Service awards -- Dr. Michael S. Brown and Dr. Joseph L. Goldstein of the University of Texas, for their studies of cholesterol chemistry in relation to the clogging of coronary arteries. They were also named Nobel Prize laureates that year.

Commenting on Mrs. Lasker's efforts, Dr. DeBakey said in a 1985 interview: "Mary Lasker is an institution unto herself. Asking what her importance has been is like asking what Harvard has meant to this country."

Throughout their history, Lasker awards have been given in every year except 1960, 1990 and 1992. In early 1990, when it was announced that no awards would be given that year, the foundation had assets of about $2.4 million, down from about $4.5 million in 1980, but an executive of the foundation said that omitting the awards, of $15,000 each, in that year "wasn't really a financial decision." Since then, the awards have been increased to $25,000 each.

'Annie Appleseed'

Like her passion for medical research, Mrs. Lasker's interest in andpatronage of urban beautification was long standing. In a 1953 column in The

New York Times, Meyer Berger referred to her affectionately as "Annie Appleseed."

Her beautification activities included furnishing funds for tulips, daffodils, begonias, chrysanthemums and other flowers at various locations in New York. Her other urban beautification projects ranged from lighted Christmas trees to 300 Japanese cherry trees donated to the United Nations.

Mrs. Lasker acquired her interest in parks and gardens during her girlhood in Watertown, Wis., where she was born to Frank Elwin Woodard, a banker, and Sara Johnson Woodard, who was a founder of two parks there.

She graduated cum laude from Radcliffe College in 1923 and studied briefly at Oxford. Then she went to work for the Reinhardt Galleries, in Manhattan, where her duties were, as she later put it, "arranging benefit loan exhibitions of outstanding old and modern French masters and selling pictures to collectors and museums."

An Art Collector

She also went on buying trips abroad and began building an art collection ofher own, which included works by Miro and Renoir. She sold most of the collection years later when she changed Manhattan homes, partly, as she said, "because I wanted to be able to give away the money."

In 1940, after leaving the art-gallery world, she married Mr. Lasker, who had achieved wealth and eminence as an advertising executive, having joined the Lord & Thomas advertising agency in 1898 and become its owner in 1908.

Two years later, he retired from active business and the Lasker Foundation was set up. In addition, drawing on his own experience in public affairs, he encouraged Mrs. Lasker to press Washington to provide more funds for research in medicine. In the decades that followed, her efforts in that direction bore many fruits.

One notable success was the National Institutes of Health in Bethesda, Md. "The N.I.H. has flowered," Dr. DeBakey recalled in the 1985 interview, "because in many ways she gave birth to it and nursed it. It was in existence, but it was she who got the funding for it."

Over the years, Mrs. Lasker also served on the boards of trustees or directors of a number of organizations and institutions, including the John F. Kennedy Center for the Performing Arts, the Museum of Modern Art, the Norton Simon Museum, New York University and Braniff Airways.

Won Presidential Medal

She was awarded the Presidential Medal of Freedom in 1969, a CongressionalGold Medal in 1989, and other honors. A Health Sciences professorship at the Harvard School of Public Health was named for her in 1989, and a new variety of pink tulip was named for her in 1985.

Mrs. Lasker's first marriage, in 1926 to Paul Reinhardt, the owner of the Reinhardt Galleries, ended in divorce in 1934.

Her sister, Alice Fordyce, was the executive vice president of the foundation and director of the Lasker Awards program. She died in 1992.

In addition to her nephew, Mr. Fordyce of Greenwich, who is a trustee of the foundation, Mrs. Lasker is survived by a stepdaughter, Frances Lasker Brody of Los Angeles; a stepson, Edward Lasker of Los Angeles; three great-nephews; five step-grandchildren, one of whom, Christopher W. Brody of Manhattan, is also a trustee of the foundation, and two step great-grandchildren.

Funeral rites and burial are to be private. A memorial service is to be held in the spring.

GRAPHIC: Photo: Mary Lasker with the heart surgeon Dr. Michael E. DeBakey in 1982. (Neal Boenzi/The New York Times)

FIRST LADY HILLARY RODHAM CLINTON
KEYNOTE ADDRESS AT THE 1993 ALBERT LASKER AWARDS LUNCHEON
OCTOBER 1, 1993
NEW YORK CITY

Thank you, Mrs. Lasker, Dr. Gutterman, Dr. DeBakey, and all of the distinguished guests gathered here for this wonderful occasion today.

I'd like to begin by offering congratulations to the winners of the Albert Lasker Awards. Dr. Blobel, Dr. Metcalf, Dr. Wexler, Congressman Rogers, you join a truly remarkable group of men and women who have helped put health care at the top of our national agenda.

Men and women who have enlightened us about the need to find cures and treatments for disease. Men and women who have helped better our health care system through public awareness and important legislation. Men and women who have been responsible for some of this century's most important breakthroughs in medical research: the discovery of penicillin as a cure for syphilis. New revelations about the structure of the DNA molecule. The development of RU-486. Advances in our understanding of the nature of the gene. And that's just to name a few.

As for the statuettes you received bearing the Greek goddess of victory, I'm glad to see that -- at least once in awhile -- Nike is immortalized as more than just a swoosh on an athletic shoe.

For me, a medical lay person and non-scientist, it is truly a privilege to be here and to participate in an event that has Albert and Mary Lasker's name attached to it. Over five decades, the Lasker name has come to embody the American ideal of good citizenship.

Vision. Intelligence. Humanity. Selflessness. These are Mary Lasker's gifts -- and fortunately for our nation, she never has ceased to share them with us.

Eleanor Roosevelt once said: "The future belongs to those who believe in the beauty of their dreams." Mrs. Roosevelt could have been talking about Albert and Mary Lasker, and Mrs. Lasker's late sister, Alice Fordyce.

We have the Laskers to thank for tulips and daffodils on Park Avenue and around this city, for azaleas and dogwoods that brighten the nation's capital, and for immeasurable contributions to education and the arts.

And of course, without Mary Lasker's energy and wisdom, our country would not lead the world today in medical -- and particularly cancer -- research.

In the past few months we have begun a great national discussion about the direction of health care in this country. It is a discussion that has involved thousands and thousands of ordinary citizens. Thousands of health care professionals. Thousands of scientists and researchers. Thousands of legislators in our states and in Congress.

For me, working on health care reform has been an extraordinary opportunity to listen to all these voices, to hear stories from people of all walks of life who know best how our system does and doesn't work.

When the President outlined his goal for health care reform some months ago, he was committed to a simple principle: to preserve and strengthen what is right, and to fix what is wrong.

While we may bring different perspectives to health care reform, I'm confident we can agree -- in general -- on what is right and what is wrong with the system today. And I think we can agree that changes must be made.

I think we can agree that every American must have comprehensive health benefits. I think we can agree that we need to control costs. That we need to ensure high quality care and reduce bureaucratic red tape. That we need to preserve individual choice of doctors and health care providers. And that we need to demand more responsibility from individuals and institutions affiliated with the health care system.

Security, simplicity, choice, savings, quality and responsibility. These are overriding principles that must be the backbone of any reform. Principles that must remain sacred as the discussion moves to the halls of Congress in the months ahead.

First, as an economic and a moral imperative, we must provide comprehensive health care benefits to every citizen -- benefits that can never be taken away. Without health security for every American, no American will be fully secure.

Second, we must simplify the system and get rid of the paperwork and forms that drown our health care professionals and discourage them from doing what they do best. And we must untangle the web of regulations that complicate not only the delivery of care in doctor's offices and hospitals -- but also the efforts of researchers and research institutions that are working toward cures and treatments we need.

Third, we must insist that Americans be allowed to choose their doctors and other health providers. This is one of the most

enduring traditions of American health care, and it cannot be sacrificed.

Fourth, we must control costs and put an end to the penny-wise, pound-foolish incentives that now rule our system. Something is wrong when you can't get covered for a mammogram but you can get covered for a mastectomy. Something is wrong when you can't get covered for a cholesterol screening but you can get reimbursed for an $80,000 bypass operation.

Something is wrong when we spend 14 percent of our national income on health care -- fueling our deficit year after year -- and our major industrial competitors are spending 8 or 9 percent and providing the same or better benefits to their citizens.

Fifth, we must protect -- and enhance -- the high quality of care that Americans have come to know. Reform will be meaningless if quality is not preserved.

Sixth, we must change our attitude about health care. Everyone must be responsible. Everyone must participate. Everyone must contribute something. No one should get a free ride.

The reason the President insists on these core principles is that, without them, the weaknesses of our system will continue to undermine its strengths.

And we cannot afford to jeopardize the things that are right with American health care -- things we have worked hard to build.

You, for example, represent what's right.

We know that medical research and high-quality health care go hand-in-hand. Your work instills your fellow citizens with optimism about the progress we can make in beating disease. It also reinforces a philosophy of preventive care that needs to be encouraged throughout this country.

We know the best way to control costs and ensure a healthier nation is to keep people free of disease. But we can't do that without emphasizing preventive medicine and without finding cures for diseases that now exact enormous economic and social tolls on our society.

I don't know much about science, certainly not enough to know the difference between opiate receptors and enkephalins [in-kef-uh-lins]. But one doesn't need to be a doctor nor a scientist to recognize the vital role of research in the race to find cures and treatments for disease.

Just in the past few years, researchers have made considerable strides in using monoclonal antibodies to help in the detection of colorectal and ovarian cancer, in discovering

likely genetic links to Lou Gehrig's disease, and in developing promising drug therapies to treat Alzheimer's and schizophrenia.

And that doesn't count Dr. Gutterman's work over the years in developing new therapies to treat cancer, or Dr. DeBakey's historic work on bypass surgery, or Dr. Blobel's pioneering research on protein production in cells, or Dr. Metcalf's discovery of CSFs [colony stimulating factors, specific white cell regulatory hormones] -- all of which ultimately contribute to shorter hospital stays, simpler treatments, and more productive lives for our citizens.

Health care reform must promote these efforts and the efforts of researchers and scientists across the country. We must continue our commitment to furthering medical science, developing new medications and technology, and thinking of new ways to improve the structure and delivery of health services.

The President's plan reflects the important role that research must play in our health care system in the years ahead. We believe that expanded investments in health research and greater support of academic health centers are critical to controlling costs, ensuring quality, and promoting a philosophy of prevention and wellness -- central goals of health care reform.

With reform, new funding will be available for prevention research and health services research.

The National Institutes of Health will expand research into a variety of areas:

* Chronic and recurrent illnesses such as Alzheimer's, cancer, cardiovascular diseases, and bone and joint diseases like osteoporosis that kill millions of Americans each year, inflict suffering on millions of others, and cost billions of dollars in treatment, hospital stays and lost productivity.

* Child health, including perinatal health, birth defects and cognitive development.

* Reproductive health, including sexually transmitted diseases, adolescent pregnancy and pregnancy-related complications.

* Mental health and substance abuse

* Infectious diseases, focusing on vaccine development and research, particularly for new and emerging diseases such as AIDS.

* Health and wellness promotion.

At the same time, the President's plan will promote research services that will help answer important questions about the effectiveness of treatments and patient outcomes. This will be useful to doctors and hospitals -- as well as academic health centers and research institutions training future doctors and scientists.

Our research institutions are centers of excellence whose integrity and importance are reflected in the President's plan. Health care reform will help academic health centers defray the institutional costs of research, development of new technology and treatment of rare and severe illnesses.

And while it is important that academic health centers prepare more students for careers as primary care physicians, they must not be discouraged from continuing to train the researchers and scientists of tomorrow.

Disease is a frightening and expensive enemy. Yet through the work of people like those honored here today, we are reminded of how much progress can be made in combatting illnesses that we never even knew existed decades ago.

In the coming months, our nation will take on another frightening and expensive adversary -- a health care system that has raged out of control for several decades.

For too long, we have allowed the ills of our system to inject unnecessary fear in the lives of millions of Americans . . . to eat away at our nation's social fabric . . . to reduce our productivity . . . to drain our federal and state budgets . . . and to threaten our economic and political standing in the world.

Now is our time, our chance to enhance the health of individual Americans and protect the health of our nation. If we can find a vaccine for polio . . . if we can discover the structure of the DNA molecule . . . if we can begin to understand the nature of the gene . . . surely we can fix a health care system that is broken.

I hope that in the months ahead, you will share with us the same sense of purpose, the same commitment to bettering humanity that you show in your labs and classrooms and research centers every day. If we all join together, I'm confident our nation can finally achieve, lasting health care reform that is long overdue.

Thank you very much.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release October 1, 1993

REMARKS BY THE FIRST LADY
AT LASKER AWARDS, NEW YORK, NEW YORK

MRS. CLINTON: Thank you. Thank you very much (inaudible) for that extraordinary introduction. There are few comparisons that do me more honor than to be compared to Mrs. Lasker, in any way at all. I don't consider myself worthy of that, but it is a standard to which all of us should aspire, and I'm very appreciative.

This is an extraordinary gathering. I know that, because the very first time I heard about the Lasker lunch was from my friend, Eppie Lederer, who told me that it was the most wonderful gathering that she had ever had anything to do with, and she would never miss it.

When the invitation came for me to be part of this, I immediately thought of what Eppie had told me once before, and said yes. I thought at the time that we might need to publicize health care reform. (Laughter.)

I think, very (inaudible), this is like parsley on the plate at dinner. It's not necessary, but it still is a nice thing to do. So for me particularly, it is an honor to be here.

I would like to begin by offering my congratulations to the winners of the Albert Lasker awards -- to Dr. Vogle (phonetic) and Dr. Metcalf (phonetic), whose work has moved us forward into that future that we all look forward to being part of, where disease and its ravages are pushed back even further; to Congressman Rogers, who has been a consistent voice for health care reform and who has been part of the meetings that I have held over the last many months; and to Dr. Wexler (phonetic), whose personal commitment is matched by her professional accomplishments.

These winners join the remarkable group of men and women who have over the decades put health care at the top of our national agenda, men and women whose work has found cures

for disease, who have aided the kind of breakthroughs that we've only been able to dream about in the past but now take for granted, men and women who have helped better our health care system through public awareness and through important legislation.

It is very exciting for me to be a part of what all of you represent. This is a time when the past and the present in medical research join together to point us to a new future, and it is one that I think all of us have a responsibility and an obligation to help shape.

For me as a lay person and non-scientist, it is always a little daunting to read about the accomplishments of those of you who are making breakthroughs, but it is also very encouraging that you are all here and your work is being supported by a woman who represents the ideal of American citizenship, to me -- a woman whose vision and intelligence, humanity, selflessness, have really been gifts to the entire nation.

Mary Lasker has brought to medical research and health awareness a rare combination of gifts. But what I particularly appreciate is not only her willingness to share those gifts with us but to recognize that it is only through persistence -- whether it be 25 years, Dr. Metcalf or, more than half a century in Mrs. Lasker's case, that real change comes about and takes root.

Eleanor Roosevelt once said that the future belongs to those who believe in the beauty of their dreams. She could have been talking about Mary Lasker and about Mrs. Lasker's late sister, Alice Fordyce (phonetic), whose family is here today.

But you know, I also want to thank Mrs. Lasker for the tulips and daffodils on Park Avenue, and around this city; I want to thank her for the azaleas and the dogwoods that brighten the nation's capital; and, I just learned from James Fordyce, I want to thank her for the rose garden at Modlin (phonetic) College at Oxford, because she had understood better than most of us ever do that the work that takes place in our laboratories, the kind of painstaking clinical research that we honor today, the work that takes place in the halls of Congress, are all devoted to enhancing life, to beautifying it around us, to inspiring all of us to live up to our God-given potentials.

So she brings, indeed, rare gifts that I hope will

inspire us, as we go through, in the next few months, this great national discussion about the direction of health care in our country. It is a discussion that needs to involve all of us: scientists in laboratories; great doctors, like Dr. De Bakey; citizens, business leaders, all of us. We all need to be part of charting our nation's destiny when it comes to our health care system.

The President has set goals, and they are goals that I think finally all of us can agree on, even if we do not agree on all the particulars as to how to achieve them. they are premised on a very simple conviction: that we have the finest-quality medical system in the world, but it is not available to us, and that what we must do is to preserve what is right about our system and to fix what is wrong.

If we agree that we are starting from a position of strength that we wish to make stronger, if we agree that what we need to be guided by are the six principles of security and quality and choice and simplicity and savings and responsibility, then I agree with the President that we can work out the details along the way. We have to assure every American comprehensive health benefits. That has to be the end result of whatever legislation is passed and signed into law. We cannot compromise on that.

In fact, earlier, Dr. Wexler pointed out to me something that just stunned me in its brilliance and its sweep. She said that, because of the work currently being done on the human gene project, it is likely in the next years every one of us will have a pre-existing condition and be uninsurable. I want you to think about that. That is a stunning and, as I said, brilliant revelation.

Dr. Wexler is uninsurable, should she move from her current clinical and professorial position, because of a pre-existing condition rooted in a gene. What will happen as we -- as we will -- discover those genes that control for breast cancer or prostate cancer or osteoporosis or any of the other thousands of conditions that affect us as human beings? Under our current system, more and more of us will be left out of the health care insurance market.

That, if nothing else, should make all of us willing to go to the end of the road together, to make sure every American has the basic right to health security. Either that, or you better slow down the genetic research that you're doing so that we don't get left out in the cold in the current insurance market. (Laughter.)

I don't think that will happen. I think we will resolve that every one of us should be secure. We will also resolve that we must have a system that simplifies the financing and paperwork attendant upon delivering health care, which drowns our professionals and discourages them from doing what they have been trained to do, which wraps the delivery of health care in a web of regulations and complications that have no place in the doctor-patient relationship.

We know we can do better and we have seen examples of how we can move toward electronic billing, toward a single form, toward eliminating a lot of the unnecessary cost that just drives the health care system to become more and more loaded down with bureaucracy and administration.

Thirdly, we do have to insist that we retain choice in this system so that individuals will feel that they have some control over their health care destiny. If we do nothing, the choices that are currently available will continue to narrow. More and more choices as to who your providers are and what treatments you are entitled to will be determined by bottom-line cost as to how much insurance is costing a business and insurance companies will more and more determine who you can see and how much you will have to pay.

We also have to get savings from our system. This is an area that is certainly one of the most challenging and, in some respects, controversial, in the President's proposal.

But as I look around this room and I see what we have accomplished through the work of many of you who run some of our major teaching hospitals or cancer centers, who have been part of breakthrough drugs coming into the market and making it cheaper and better for people to get treatment, when I look at how care is delivered more efficiently at high quality in some parts of our country because of the way doctors and hospitals are organized, I know we can do this.

It will mean changing some of the ways in which things have been done before, but it is just defying common sense for us not to commit ourselves to getting the kind of efficiencies in our system we know are there, which will not undermine quality but, instead, enhance it.

I have said several times over the past three days, we have too many examples of what we know works and what we know can be done to deliver high-quality care. What we don't have are incentives in our current system that will motivate people to choose those alternatives over just doing it the

way we have done it -- a piecework approach to reimbursing physicians and others. That can no longer be sustained financially or in respect to the human cost that it unfortunately creates.

Something is wrong when we spend 14 percent of our national income on health care when our major competitors and other nations around the world, from Australia to Canada to Germany to Japan, take care of all of their citizens, have higher outcomes on all kinds of national indices of public health, and spend only 8 or 9 percent of their national income. We know that we can do better than we are doing.

As you know in this room, if we do everything and do not protect and enhance quality, we will not have moved forward. Therefore, it will be meaningless, if quality is not preserved. We are working very closely with the academic health centers of this country, some of whom are represented in this room, to make sure that they become the quality foundation of what we are attempting to do in health care reform. I am very grateful to the deans of a number of our leading medical schools and to the heads of a number of our national cancer centers for being part of our efforts to ensure and, in fact, enhance the roles that they will play in the future.

Finally, we do have to change our attitudes about health care. We need to instill more of a sense of responsibility at all levels -- at the individual level where we be come more responsible for our own health; at the community and public health level where we take on the plagues of violence, teenage pregnancy, AIDS, drug abuse, that drive our costs up at both horrific human and economic tolls. Everyone has to contribute. Everyone has to take responsibility.

These core principles will guide us to a strengthened health care system without undermining what is right within it. We know that medical research and high-quality health care go hand-in-hand. Your work represents that kind of partnership. It reinforces the optimism and hopefulness that Dr. Gutterman (phonetic) referred to. It also reinforces a philosophy of preventive care, of trying to cure, not merely treat.

We know that without emphasizing medical research, we cannot have a health care system that will give us the kind of health care we want to have as a nation. So to that end, we are going to be strengthening our commitment as a

nation to health care research. We are going to be asking for more funding and we're going to be looking for a firmer funding foundation, a stream of funding, that will match the kind of personal commitment that Mrs. Lasker has made over all of these years. (Applause.)

Now, we are doing that because we believe that expanded investments in health research and greater support of academic health centers are critical to not only ensuring quality but controlling costs and promoting a philosophy of prevention and wellness. With reform, new funding will be available for prevention research and health services research.

The National Institutes of Health will be asked to expand research into a variety of areas: common and recurrent illnesses, such as Alzheimer's, cancer, cardiovascular diseases, and bone and joint diseases like osteoporosis, that kill millions of Americans each year, inflict suffering on millions of others, and cost billions of dollars in treatment, hospital stays, and lost productivity; children's health, including perinatal health, birth defects, and cognitive development; reproductive health, including sexually-transmitted diseases, adolescent pregnancy, and pregnancy-related complications; mental health and substance abuse.

I want to say just an additional word about those two. In the comprehensive benefits package that the President's plan will propose, we include mental health benefits and substance abuse treatment, not to the extent that we would have liked but to the extent that we feel we can afford in order to have it firmly rooted in our health care system.

I would predict that, among the many struggles we will have, one will be over whether we will retain mental health benefits and substance abuse treatment. I hope those of you whose research or work has touched in either of these areas will stand with us for the very firm belief that, without treating mental health, without treating substance abuse, we are not going to have true health care reform. Those are diseases and those are conditions that undermine physical health in ways that we must address now, and we will need your support (inaudible) -- (Applause.)

We will also focus more attention and resources on infectious diseases, focusing on vaccine development and research, particularly for new and emergent diseases and

variations on diseases, such as AIDS and any variation that is on the horizon. We also want to focus on health and wellness promotion, and then, hand-in-hand with the human gene project, genetic diseases.

At the same time, the President's plan will promote research services that will help answer important questions about the effectiveness of treatment and patient outcomes. This will be very useful to doctors and hospitals as well as academic health centers and research institutions training future doctors and scientists.

As I have said repeatedly over the last three days, we know that different operations cost different amounts of money in different regions of the same state and in different regions of our country, without differences in quality outcome. We have to begin focusing more research on these kinds of differentials and publicizing that information among the medical and research communities.

As I have pointed out, the state of Pennsylvania has kept records about cardiac bypass surgery, among other operations. Hospitals charge between $21,000 and $84,000 for the same operation. There has been no recorded difference in quality outcome. In fact, with respect to mortality, the operations that cost closer to $21,000 are as good or better than some of those performed in hospitals that charge closer to $84,000.

If there are ways we can begin to change practice styles and decision-making among physicians so that the information that we will have available can be better utilized, I would argue we will be enhancing quality. We can afford in our country to provide more cardiac bypass surgery at high quality if the cost is closer to $21,000 than we can if it is closer to $84,000. But that information has to be well researched, well publicized, and then implemented.

As we move forward, we want particularly to emphasize the roll that the academic health center will play in getting that kind of quality information out into clinical practice. And, if the academic health centers serve as what we are calling the quality foundation for health care reform, we will not need to be reinventing the wheel or creating any new bureaucracy but, for the first time, better coordinating the information we have available and better disseminating it so it can be acted upon.

This will be an extraordinary challenge in the next

months for all of us because we will be taking on an issue that has defied resolution over many years. It is one about which all of us have strong feelings based on personal and/or professional experience.

But for too long we have refused to deal with what every one of us in this room knows are the problems in our health care system. We have allowed the ills of our system to inject unnecessary fear in the lives of millions of Americans, to eat away at our nation's social fabric, to reduce our productivity, to drain our federal and state budgets, to undermine physician and scientific independence and autonomy in decision-making, and to threaten our economic and political standing in the world.

Now is our time -- our time to enhance the health of individuals Americans and protect the integrity of our entire health care system. If we can find a vaccine for polio, if we can discover the structure of DNA, if we can begin to understand the nature of the gene, surely we can make the political decisions necessary to fix and treat a health care system badly in need of it. I hope that you will share with us the same sense of purpose, the same commitment to bettering humanity that we have shown in labs and classrooms and operating rooms and research centers every day over many years.

I am absolutely confident we can meet this challenge if all of us decide we are up to it, work together, and have the kind of hope and faith in the future that motivated Mary Lasker. When nobody was paying attention to her, when nobody would listen to her, she never gave up, and we can't either. That is the tribute she deserves from us.

Thank you all very much. (Applause.)

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ALBERT AND MARY LASKER FOUNDATION

MARY WOODARD LASKER

A Brief Biography (written in 1993)

For more than 40 years, Mary Woodard Lasker has brought her relentless determination and energy to the fight to conquer the major killing and crippling diseases of our time. She has devoted a lifetime to encouraging Federal and state recognition of medical research in cancer, cardiovascular disease, mental illness, arthritis, neurological diseases and blindness. And equally important, she has worked tirelessly for increased private and governmental support for such research.

As President of the Foundation which she established with her late husband, Albert D. Lasker, Mrs. Lasker has played a key role in influencing the course of medical research in America by urging increased funding for medical research to prolong the prime of life.

The Albert and Mary Lasker Foundation's renowned annual Albert Lasker Awards for outstanding contributions to medical research and in Public Service are today among the most coveted American honors for scientific achievement and public health advances.

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In addition to her singleminded dedication to improved health care for Americans, Mrs. Lasker has been a leading proponent of urban beautification and has funded hundreds of tree- and bulb-planting projects in New York City and Washington, D.C. In 1985, a new variety of pink tulip was named in her honor.

EARLY YEARS

Mary Woodard Lasker was born in Watertown, Wisconsin, the elder of two daughters of Frank Elwin and Sara Johnson Woodard. Mrs. Lasker first attended the University of Wisconsin, then Radcliffe College where she graduated cum laude with a B.A. degree. Later, she took post-graduate studies at Oxford University, England.

Her first marriage, in 1926 to art gallery owner Paul Reinhardt, ended in divorce. In 1940, she married Albert Davis Lasker, advertising pioneer and owner of the famed advertising agency, Lord and Thomas.

THE LASKER FOUNDATION IS ESTABLISHED

In 1942, she and Mr. Lasker established the Albert and Mary Lasker Foundation to raise public awareness about major killing and crippling diseases and the urgent need for

increased research funding to conquer them. Her sister, Mrs. Alice Fordyce, is Executive Vice President of the Foundation and Director of the Albart Lasker Medical Research Awards Program.

In 1944, they presented the first Albert Lasker Medical Research Awards to encourage and honor physicians and scientists for outstanding achievements in medical research and public health administration. The first Award recipient was Col. William C. Menninger for his work during World War II in mental health and War Psychiatry.

In the years since, the Lasker Awards have achieved international pre-eminence, and 49 Lasker Award winners have later won the Nobel Prize.

A NATIONAL HEALTH POLICY TAKES SHAPE

In the 1940's, the Laskers played a central role in encouraging increased funding for basic cancer research. Among their first efforts was a public awareness campaign on behalf of the group which was later to be reorganized as the American Cancer Society. Later, the Laskers were vigorous in encouraging Congress and the Executive Branch to mount an unprecedented national government-sponsored research effort for all medical sciences. This effort not only expanded the scope and budget of the National Cancer Institute but ultimately resulted in the creation of new Institutes within

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the National Institutes of Health.

MARY LASKER WINS MEDAL OF FREEDOM

Although Mr. Lasker died of cancer in 1952, Mary Lasker, undaunted in her quest to conquer disease, redoubled her efforts and carried on alone. In 1969, President Lyndon B. Johnson presented her with the Medal of Freedom, the highest national award given to a private citizen, for her tireless work in improving Americans' health care. Mrs. Lasker was a vigorous proponent of the historic National Cancer Act which in 1971 launched the United States' War on Cancer.

In 1984, Congress named a new center, the Mary Woodard Lasker Center for Health Research and Education at the National Institutes of Health, in her honor.

GUIDING FORCE FOR MANY ORGANIZATIONS

In addition to serving as president of the Albert and Mary Lasker Foundation, Mrs. Lasker is an honorary member of the board and executive committee of the American Cancer Society, chairman of the National Health Education Committee, vice-president of the Research to Prevent Blindness Committee, and trustee and vice-chairman of the board of the United Cerebral Palsy Research and Education Foundation.

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Under her guidance, the Lasker Foundation produced "Killers and Cripplers," a handbook on illness and disease for Congress and the lay public. Since 1969, four editions of this widely used guide have been published with a fifth scheduled for publication in 1987.

In 1973, Mrs. Lasker organized physicians and laymen into a new national committee with a New York chapter, "Citizens for the Treatment of High Blood Pressure" -- an effort which contributed to a 40% reduction in the number of deaths from high blood pressure in New York State alone.

From 1980 to 1984, she was a member of the advisory committee to the Director of the National Institutes of Health.

LEGENDARY PASSION FOR FLOWERS

Mary Lasker is also legendary for her passion for environmental beautification. As early as 1943, she began brightening New York City's bleak parks and streets with colorful winter-hardy chrysanthemums. In 1956, she created 20 blocks of tulips and daffodils on Park Avenue -- an effort which has resulted in the planting of millions of flowers, shrubs and trees by the City and private individuals.

Through the Society for a More Beautiful National Capital, Mrs. Lasker contributed numerous plantings,

including 10,000 azalea bushes along Pennsylvania Avenue, 900 flowering trees on Hains Point, 2,500 dogwood trees in Lady Bird Johnson Park, and more than 1,210,000 daffodil bulbs for Rock Creek Park, in Lady Bird Johnson Park and Potomac Parkway, and a jet fountain at the tip of Hains Point.

Mrs. Lasker has a distinguished collection of artwork including watercolors and drawings by Picasso, Matisse, Chagall, Dufy, Dali, Utrillo, Gottlieb, Sam Francis, Mathieu, Okada, Jenkins, Stamos, and pieces of early Greek and Roman sculpture.

MARY LASKER AWARDED CONGRESSIONAL GOLD MEDAL

In April 1989, President Bush presented to Mrs. Lasker on behalf of the Congress, a special Congressional Gold Medal for her humanitarian contributions in the areas of medical research and education, urban beautification, and the fine arts.

MARY WOODARD LASKER PROFESSORSHIP

The Mary Woodard Lasker Professorship of Health Sciences was established at the Harvard School of Public Health in 1989 to perpetuate Mrs. Lasker's life's crusade for the discovery of new knowledge to promote health.

AWARDS AND HONORARY DEGREES

Mrs. Lasker holds honorary degrees from the Albert Einstein College of Medicine of Yeshiva University, University of Wisconsin, Bard College, University of Southern California,

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Women's Medical College of Pennsylvania, New York University, New York Medical College, Jefferson College of Philadelphia, Columbia University and the University of California at Berkeley. Radcliffe has given her its highest honor, the Radcliffe Achievement Award. In 1987 she received a Doctor of Humanities Degree from Harvard University.

Mrs. Lasker is a member of the French Legion of Honor and has received the Cross of the Officer of the Legion of Honor. She is also listed in "Who's Who."

She is the recipient of:

The John H. Finley Medal from City College of New York;

The Gold Heart Award of the American Heart Association;

Mayor Wagner's Award for Distinguished and Special Service to the City of New York;

The Weizmann Award of the American Committee for the Weizmann Institute of Science;

The Heart of Gold Citation of the New York Heart Association;

The Municipal Art Society Award;

The Edward R. Loveland Memorial Award of the American College of Physicians;

The Medallion Award of the Foundation for Research on the 50th Anniversary of the Osteopathic Society of the City of New York (1960);

The 1966 Arthritis Foundation Award;

The 1966 Annual Special Award of the Horticultural Society of New York;

The 1966 New York State Award of the New York State Council of the Arts;

The 1967 Gold Heart Award of the International Cardiology Foundation;

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The 1968 Distinguished Service Award of the American College of Cardiology;

The Sidney Farber Gold Medal of the Children's Cancer Research Foundation (1969);

The "Founders Award" and the Alfred Sloan Award from the American Cancer Society's New York City Division (1971);

The 1973 Ladies Home Journal Women of the Year Award;

Award from Memorial Hospital (1973);

The 1973 Albert Gallatin Associates Award (New York University);

The 1974 James Ewing Society's Cancer Award;

Lifeline Award of the American Health Foundation (1974);

The 1976 United Cerebral Palsy Humanitarian Award;

The Cancer Research Institute's William B. Cooley Award (1977);

The 1977 World Rehabilitation Fund Award;

The National Heart, Lung & Blood Institute Advisory Council's First Distinguished Service Award (1978);

The 1980 Hubert Humphrey Award from Boston University School of Medicine;

The 1980 Distinguished Public Service Award from the American Academy of Opthalmology;

The 1982 Lord & Taylor Rose Award;

The first Nathan S. Kline Medal of Merit from the Nathan S. Kline Institute for Psychiatric Research (1983);

The Central Park Conservancy's Frederick Law Olmsted Award (1984);

The American Tentative Society's Rennie Taylor Award (1985);

The 1985 "Flame of Hope" Award from the Terri Gotthelf Lupus Research Institute;

The 1985 Edwin C. Whitehead Award of the National Center for Health Education;

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The 1985 "Woman of Distinction" Award from Birmingham Southern College;

The Endocrine Society's Endocrine Award (1985);

In 1986, the first recipient of the New York Lung Association's Quality of Life Award;

The Patriot's Award from the Congressional Medal of Honor Society in 1986;

The first woman to receive the Vision Award from the Luminaires of the Estelle Doheny Eye Foundation (1986);

The first Giovanni Lorenzini Foundation Prize for the Advancement of Biomedical Science from the Giovanni Lorenzini Foundation, Inc., in 1987;

The 1987 Mayor's Award of Honor for Science and Technology, presented by Mayor Edward I. Koch;

The 1987 Dorothea Dix Award from the Mental Illness Foundation;

The 1987 Award from the Federation of American Societies for Experimental Biology;

The 1987 Walsh McDermott Award from the Associated Medical Schools of New York;

The National Cancer Institute's Year 2000 Award (1987);

A Franklin D. Roosevelt Freedom Award from the Franklin and Eleanor Roosevelt Institute (1987);

The 1987 Susan G. Komen Foundation Award for Excellence in Public Service;

A 1987 Charles A. Dana Foundation Award for Pioneering Achievements in Health and Higher Education;

The first Gold Medal Award for International Achievement in Medical Research from the National Foundation for Ileitus and Colitis (1987);

A 1988 Parks Council Award;

Winner of one of the first annual Caring Awards from the Caring Institute (1988);

The American Federation for Clinical Research's "Distinguished Friend of Medical Research Award" (1989);