Withdrawal/Redaction Sheet
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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. resume	Curriculum Vitae of Douglas A. Melton (partial) (1 page)	n.d.	P6/b(6)
002. fax	To Ruby Shamir from Sally Lippincott re: Banner for JDF press event (partial) (1 page)	06/04/99	P6/b(6)

COLLECTION:
Clinton Presidential Records
First Lady's Office
Ruby Shamir (Subject Files)
OA/Box Number: 20365

FOLDER TITLE:
Health/Juvenile Diabetes 6-99 Event [2]

2012-0565-S
ry1255

RESTRICTION CODES

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

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
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PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
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Freedom of Information Act - [5 U.S.C. 552(b)]

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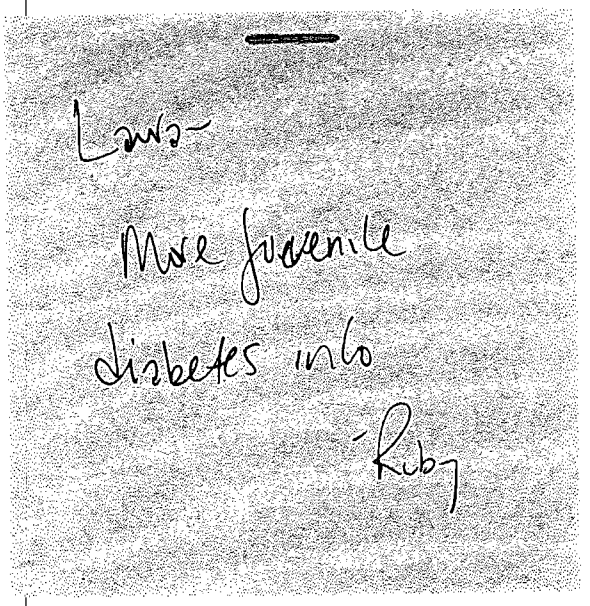
JUVEN



THE WHITE HOUSE

EVENT: Juvenile Diabetes Event
DATE: Monday, June 7
TIME: 2:30 PM
LOCATION: Room 450-OEOB

Members of Congress:

~~Sen. Harry Reid (D-NV)~~
Rep. Maurice Hinchey (D-NY)
Rep. Joe Hoeffel III (D-PA)

FIRST LADY HILLARY RODHAM CLINTON

REMARKS AT JUVENILE DIABETES EVENT

ROOM 450 OEOB

JUNE 7, 1999

Thank you and welcome to the White House. I am so pleased that we are joined today by Senator Reid; Congressman Hinchey, Congressman Hoeffel; and so many parents, children, scientists and advocates who are working with the Juvenile Diabetes Foundation's Children's Congress to cure diabetes – and help those it strikes.

We know there are a million people living with juvenile diabetes – and many of them are children. For them, so much of the stuff of childhood is beyond their grasp. For them, fear and uncertainty is a daily companion. **For children with diabetes, insulin is nothing more than a lifeline. And, we cannot rest until we find a cure.**

That is why all of us are here today.

Before we begin, I want to tell you a little bit about the program. We are very honored to be joined by three extraordinary speakers. All of them are leaders in the fight against Juvenile Diabetes. All of them have been personally touched by the disease.

Samantha Ann Mandel just turned 10 last month – Happy Birthday

Samantha. She has not only been very brave in her battle against diabetes, but she's also reached out to help other children learn about and cope with their disease.

We'll also hear from Dr. Doug Melton, the Chairman of the Molecular and Cellular Biology Department at Harvard University. He is the father of a son with diabetes -- and a leading scientist who is helping to put us on a fast track to a cure.

And, we are also very privileged to be joined by Mary Tyler Moore. As an actress, she has made many of us laugh and cry. As an activist and the International Chair of the Juvenile Diabetes Foundation, she has educated and inspired us to join her in this fight.

It is my great honor to introduce someone whose grace and commitment has touched each and every one of us: Mary Tyler Moore.

[Mary Tyler Moore speaks followed by Dr. Melton and Samantha Mandel – who introduces you]

Thank you, Samantha for that introduction, and for your courage

and eloquence. Now, as many of you know, Samantha is one of 100 children from all 50 states who will be bringing her message to Capitol Hill on June 22 as part of the JDF Children's Congress. And, I can't help but think that if every member of Congress hears Samantha and other children like her they will work even harder for a cure.

So, I want to thank you, Samantha – and thank all the children who are here as part of the Children's Congress. Could you all stand? Let's give them a round of applause.

They are the best experts we have on juvenile diabetes – and so it shouldn't come as any surprise that the original idea for a Children's Congress came directly from them. It all started with Tommy Solo, a nine year old from Boston, who unfortunately couldn't be here with us today. One day, he asked his mother if the kids who have diabetes could come to Washington and tell the government to support research to find a cure. And, now his dream has come to pass.

I also want to thank 8 year-old Joey Silvestri and his parents – Sandra and Alan -- who are chairing the Children's Congress. Alan is an

Academy Award nominated composer -- and he wrote a beautiful song, "Promise to remember me" that has become the theme of the Children's Congress.

Just imagine what we could accomplish on juvenile diabetes – not to mention child care, health care, violence and other important issues – if every single adult in this country promised to remember the children.

Imagine if all Americans heard the voices of children like Samantha and the others here today. I have looked into the eyes of so many children and families coping with juvenile diabetes. I have seen the toll it takes. The heartbreak that too often accompanies everyday life [Erskine Bowles]

Any of the children in this room can tell you: They live with the pain of insulin injections. They live with the fear that diabetes will take away their health and even their lives. They live with the kind of day to day uncertainty that no child should ever face.

Now, because of the people in this room and around the country who have demanded that we remember the children, we've made progress over the last 6 years. Gone are the days when people with

diabetes were simply told about their blood glucose levels: "Don't let it get too high and don't let it get too low."

Since then, we've learned that carefully managing diabetes significantly lowers the rates and severity of eye, kidney and nerve complications. We've launched a National Diabetes Education Outreach Program, with an 800 number [1-800-GET-LEVEL] that is helping Americans get the information they need – when they need it. And we've searched for ways to make the process less painful – whether it is administering insulin through nasal sprays and pills. Or "reading" blood glucose levels without having to prick your finger (a real "tear-saver" for children and their parents.)

But, we've always understood that, while diabetes management can help **until** we find a cure, it can never be a replacement for a cure. No parent who sees their child suffering wants to tell them to keep waiting. That some day, things might get better. Our objective has – and will continue to be -- to find a cure – and to do it now.

That's why two years ago, the President signed into law legislation which dedicates $150 million for juvenile diabetes research. It's why we have pledged to continue to fight this disease by implementing the

recommendations of the Diabetes Research Working Group, which has produced a blueprint to move us down the path to find a cure. And it's why we have dramatically increased funding for NIH research, including a 60 percent increase for diabetes alone.

And it's paying off. Just last week, we learned of a remarkable breakthrough in research. Scientists were able to essentially cure diabetes in monkeys. And they did so by giving them insulin producing cells along with an experimental drug, which stopped them from rejecting the transplant.

As many of you know from painful experience, right now the drugs used to prevent transplant rejection have serious side effects and leave the patient vulnerable to infections. What this breakthrough offers is not only hope for people with diabetes. It could also increase the likelihood that people will end up with organ transplants they can successfully tolerate. And it could result in new treatments for autoimmune diseases, including lupus, multiple sclerosis, and rheumatory arthritis.

In many ways, this discovery is the product of two decades of NIH research. **And, I'm so pleased to announce that NIH will soon award**

$120 million for clinical trials to move this breakthrough from the laboratory into the homes of the children who need it. This award will be a 7-year contract given to an international consortium of investigators. It was only possible because of the bipartisan consensus between the President and the Congress that led to a $30 million increase in NIH funding for diabetes research this year.

And it is our hope that these advances will lead to a real cure for diabetes – so that our children will have to turn to the history books to learn about daily insulin shots.

That is the dream that the Children's Congress will bring to Washington in a few weeks. They will testify before Congress. They will meet with their representatives. They will sing their song "Promise to Remember Me" on the Capitol Steps. And they will bring thousands of letters to explain what it's like to live with diabetes.

I will never forget the letter I received from Joey Silvestri. He wrote: "Every night my little brother and I say our prayers. My little

brother James always prays for a poke man toy. My sister prays for good grades. But I pray for a cure for diabetes. My mom says I can ask for other things but I don't want anything as much as I want a cure for diabetes."

There are children like Joey all over the country. They are praying for health. They are praying for the lives they should have – lives without fear or limitation. They are praying for our help. And, it is up to all of us to remember their voices and answer their prayers.

With the JDF continuing to lead the way, I know that day will come. Thank you very much.

June 5, 1999

Date:	**Monday, June 7, 1999**
Time:	**2:30 PM – 3:30 PM**
Location:	**Room 450**
	The White House
From:	**Neera Tanden and Ruby Shamir**

I. PURPOSE

To focus attention on juvenile diabetes by spotlighting the Juvenile Diabetes Foundation's Children's Congress campaign which urges lawmakers to support juvenile diabetes research, and by announcing new research grants from the National Institutes of Health that will address the needs of people who suffer from juvenile diabetes.

II. BACKGROUND

Overview

The theme of this event is to focus attention on the search for a cure for juvenile diabetes – and the need for more research for the effort. Scientific research is close to finding a cure – a potential cure for diabetes in monkeys was recently discovered – and the Juvenile Diabetes Foundation (JDF) and other advocates strongly urge the support of diabetes research.

You are kicking off JDF's Children's Congress which is designed to educate Washington leadership about the issues surrounding children who live with diabetes. The theme of the Children's Congress, "Promise to Remember Me," is a call to action, asking lawmakers to remember children with diabetes when appropriating funds for medical research. The first annual Children's Congress will take place in Washington D.C. from June 20 to June 22 (you are out of the country) when 100 children with diabetes will meet with policymakers and their staffs to talk about life with diabetes and urge them to provide the funding that can lead to a cure for the disease.

In response to this "call to action" you will have the opportunity to announce new National Institutes of Health (NIH) research grants which will move us closer to finding a cure for juvenile diabetes and other diseases which share some of its characteristics.

Clinton Administration Diabetes Record

Over the course of this Administration, funding for diabetes research has risen substantially. Since 1992, funding for such research from the National Institute of Allergy and Infectious Diseases (NIAID) has increased by almost 200% from about $4.6 million in FY 1992 to nearly $14 million in FY 1999 – and all of NIAID's diabetes funding focuses on juvenile diabetes. Additionally, the National Institutes of Health (NIH) funding for diabetes research increased by over 60%, from approximately $278 million in FY 1992 to almost $450 million in FY 1999.

The FY 2000 Budget proposes $15.9 billion for NIH overall, and $460 million for research on diabetes. In addition, the Administration strongly supported a dedicated stream of funding -- $300 million over five years -- for diabetes research, prevention, and related health services in the Balanced Budget Agreement of 1997. This money will support research at NIH on juvenile diabetes. Indeed, the NIH grant described below is a direct result of that investment.

Background On Juvenile Diabetes

Juvenile diabetes, also known as Type 1 diabetes, is an autoimmune disease, which causes the body's immune system to destroy the insulin-producing islet cells of the pancreas responsible for production and regulation of the hormone insulin. In a person with juvenile diabetes, the body's immune system actually turns on the pancreas and kills these cells. Since insulin enables people to metabolize glucose and turn it into energy, people with Type 1 diabetes must take injections of insulin to stay alive. Some people with diabetes get organ transplants, but these too are susceptible to rejection by the immune system, and are dangerous because people who currently receive transplants must take highly toxic immunosuppressive drugs to prevent organ rejection. Much recent diabetes research has focused on the challenge of eliminating or controlling this autoimmune response, thereby halting the killing of the insulin-producing cells.

In recent years, scientists have discovered that they can produce very specific "blocking" antibodies that can prevent the autoimmune response from occurring, while leaving the rest of the immune system unaffected. If the immune response is turned "off," the destruction of tissues such as islet cells can be avoided. This approach promises to achieve a number of goals, including the ultimate goal of normalizing the metabolism of people with juvenile diabetes, thereby eliminating the need to take insulin injections. This approach also would eliminate the need for drugs that suppress the entire immune system -- drugs that have serious side effects and leave transplant recipients vulnerable to infections – and increase the likelihood that individuals who need transplants will find suitably matched organs.

NIH Grant

This summer, the NIH will award in stages a seven-year, $120 million contract to capitalize on the striking advances that have been made in immune tolerance research. The contract will support the National Institute of Allergy and Infectious Diseases (NIAID) Network for Clinical Research on Immune Tolerance, an international clinical trials system that will examine tolerance-inducing therapies for transplantation and autoimmune diseases. The knowledge gained from these clinical trials will also be applied to all people suffering from, or at risk for, autoimmune disease, as well as those receiving whole organ transplants. Scientists and advocates believe that these advances are likely to lead to a real cure for diabetes.

Funding for this consortium was made possible, in part, by a bipartisan consensus between the President and the Congress that led to a $30 million increase in NIH funding for diabetes research in FY 1999.

Background on the Juvenile Diabetes Foundation

The JDF is a not-for-profit, voluntary health agency with chapters and affiliates throughout the world. JDF's main objective is to support and fund research to find a cure for diabetes and its complications. JDF gives more money directly to diabetes research than any other private health agency in the world by awarding research grants for laboratory and clinical investigations and sponsoring a variety of career development and research training programs for new and established investigators.

III. PARTICIPANTS

Greeters

See attached list

Stage Participants

- Mary Tyler Moore, Chairman of the Juvenile Diabetes Foundation International
- Dr. Doug Melton, Ph.D., Chair, Dept. of Molecular and Cellular Biology, Harvard University
- Samantha Ann Mandel, 10 years old, and has juvenile diabetes
- The First Lady

IV. SEQUENCE OF EVENTS

- First Lady opens briefly and introduces Mary Tyler Moore.
- Mary Tyler Moore makes brief remarks and introduces Dr. Doug Melton.
- Dr. Doug Melton makes brief remarks and introduces Samantha Ann Mandel.
- Samantha Ann Mandel makes brief remarks and introduces the First Lady.
- The First Lady makes remarks and closes the program.
- Immediately following the speaking program, Samantha Ann Mandel gives the First Lady a JDF t-shirt.

V. PRESS PLAN

Open Press

VI. REMARKS

Provided by Laura Schiller

Announcement on Juvenile Diabetes

June 7, 1999

Meet and Greet

1. Mary Tyler Moore, JDF International Chairman
2. S. Robert Levine, MD, Member, JDF International Board (Husband of Mary Tyler Moore)
3. Robert Wood Johnson IV, Chairman, JDF
4. Rep. Joe Hoeffel III (D-PA)
5. Rep. Maurice Hinchey (D-NY)
6. Leah Mullin, Chair, JDF Government Relations Committee (Wife of Leo Mullin, Delta Airlines President and CEO)
7. Sandra Silvestri, Chair, JDF Children's Congress (Wife of Academy Award Nominated Composer Alan Silvestri)
8. Joseph Silvestri (has juvenile diabetes, son of Sandra)
9. Doug Melton, Ph.D., Chair, Dept. of Molecular and Cellular Biology, Harvard University (Will speak on his son and his professional interest in curing diabetes)
10. Gail O'Keefe (Wife of Doug Melton)
11. Samuel Melton (has juvenile diabetes)
12. Emma Melton (sister of Sam)
13. Jon Mandel (Advertising Agency Executive from NYC)
14. Patty Lyon Mandel (mom of Samantha)
15. Samantha Mandel (has juvenile diabetes and will introduce Mrs. Clinton)
16. Director Tenet and his brother
17. Dr. Bill Tenet (Director Tenet's brother, has diabetes)
18. Dr. Daniel Rotrosen, Director, Division of Allergy, Immunology and Transplantation, NIAID
19. Dominic Bianchi

MARY TYLER MOORE

For the past 16 years, Mary Tyler Moore has been the International Chairman of the Juvenile Diabetes Foundation International (JDF). JDF, with its chapters from coast to coast and affiliates around the world, gives more money to diabetes research than any other non-profit, non-governmental organization in the world. To date, JDF has given more than $290 million toward that end.

Mary Tyler Moore has committed herself to raising the public's awareness of the seriousness of diabetes through her frequent visits to Capitol Hill, Congressional testimony, and highly visible public service announcements and media campaigns.

As International Chairman, Ms. Moore is leading the JDF Children's Congress, which will be held in Washington, D.C. June 21-22, 1999. This is the first event of its kind, designed to educate Washington leadership about the issues surrounding children who live with diabetes. The theme, "Promise to Remember Me", will be a powerful call to action, asking lawmakers to remember children with diabetes when appropriating funds for medical research.

Ms. Moore also serves as Chairman and is a generous contributor to JDF's $200 Million International Initiative – "The Only Remedy Is a Cure" – a campaign dedicated to accelerating the pace of research to cure diabetes.

The collective support of corporate and individual friends along with JDF's longstanding partnerships with the National Institutes of Health/Diabetes Research Programs have brought JDF to a threshold of a cure. Ms. Moore believes that we must now capitalize on the opportunities provided by research and build a bridge from the laboratory bench to the bedsides of those with diabetes – translating research advances into longer and healthier lives for all who suffer from this disease.

Mary Tyler Moore has written a best selling autobiography, <u>After All</u>, which includes a chapter on the Foundation and her diabetes. She knows diabetes first hand, as someone who has lived

with the disease for over 30 years. Her combined efforts have resulted in greater public awareness and sensitivity to the disease.

Ms. Moore currently resides in New York City with her husband, S. Robert Levine, M.D. Like his wife, Dr. Levine is a leading volunteer for the Juvenile Diabetes Foundation, serving on its International Board of Directors. He is chair of the Board's Communications committee as well as a member of its Executive, Research Advisory, Government Relations, Planning and Steering Committees.

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CURRICULUM VITAE

NAME	Douglas A. Melton
PLACE AND DATE OF BIRTH	P6/(b)(6) [001]
ADDRESS	Howard Hughes Medical Institute Department of Molecular and Cellular Biology Harvard University 7 Divinity Avenue Cambridge, MA 02138

UNIVERSITY EDUCATION

1971-1975	B.S. in Honors Biology University of Illinois Champaign-Urbana, Illinois
1975 – 1977	B.A. in History and Philosophy of Science Cambridge University Cambridge, England
1980	Ph.D. in Molecular Biology Supervisor: J.B. Gurdon Trinity College & MRC Laboratory of Molecular Biology Cambridge University, England

SCIENTIFIC POSITIONS

1998-	Chairman, Department of Molecular and Cellular Biology. Harvard University
1994-Present	Howard Hughes Medical Institute Investigator
1994-Present	Associate Member, Children's Hospital Boston
1993-Present	Biologist (Medicine) Massachusetts General Hospital
1988-Present	Professor of Molecular and Cellular Biology Harvard University
1987	John L. Loeb Associate Professor of the Natural Sciences Harvard University

SCIENTIFIC POSITIONS (CONT'D)

1984-1987	Associate Professor Department of Biochemistry and Molecular Biology Harvard University
1981-1984	Assistant Professor Department of Biochemistry and Molecular Biology Harvard University

ACADEMIC HONORS

Edmund J. James Scholar, University of Illinois, 1971-1975; Phi Beta Kappa, 1975
Marshall Scholarship, awarded for study at Cambridge University, 1975-1978
Max Perutz Prize, 1981
Camille and Henry Dreyfus Award, 1981
Searle Scholar Award, 1983-1986
American Society of Biochemistry and Molecular Biology Young Investigator Award, 1991
George Ledlie Prize, 1991
Richard Lounsbery Award, National Academy of Science, 1995
Member, American Academy of Arts and Sciences, 1995
Member, National Academy of Arts and Sciences, 1995
Honorary Member, Japanese Biochemical Society, 1996

SCIENTIFIC JOURNALS

USA Editor, *Development*
Editor, *Neurobiology*
Editor, *Cytokine & Growth Factor Reviews*
Editor, *Science*
Editor, *Publications of the National Academy of Science*

Samantha Ann Mandel

Samantha Mandel, who turned ten this past May, was diagnosed with Type 1 diabetes right after her second birthday.

She is a fourth grade student at the Town School in New York City where she was born and lives with her parents. She has many extracurricular activities that interest her from jazz and tap dancing to art, golf and tennis. She has attended the Clara Barton Camp (for girls with diabetes) for two weeks each of the last three summers.

Samantha has tried to help other children who have been diagnosed with diabetes in understanding what life will be like for them with this disease. She is proud of her work talking to people about Juvenile Diabetes and why it is important to find a cure for the disease.

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THE JDF Children's Congress

"Promise to remember me..." Children with diabetes, advocates for a cure.

TO: Ruby Shamir, Office of the First Lady
fax: 202-456-2878

FROM: Sally Lippincott, HD&A - on behalf of JDF
phone: 703-288-8680

DATE: June 4, 1999

SUBJECT: Banner for JDF press event (2 pages)

Ruby,

Please see the included proof of the banner. I'll call with material confirmation. Also listed is identification information for Robin Lyttle who will be delivering and installing the banner for us.

Robin Stevens Lyttle
dob: P6/(b)(6)
ss#:

[002]

I am telling her to arrive at 12:45 p.m. at the downstairs entrance on 17th Street (at G) on Monday, June 7th. You will have an intern meeting her there for unloading.

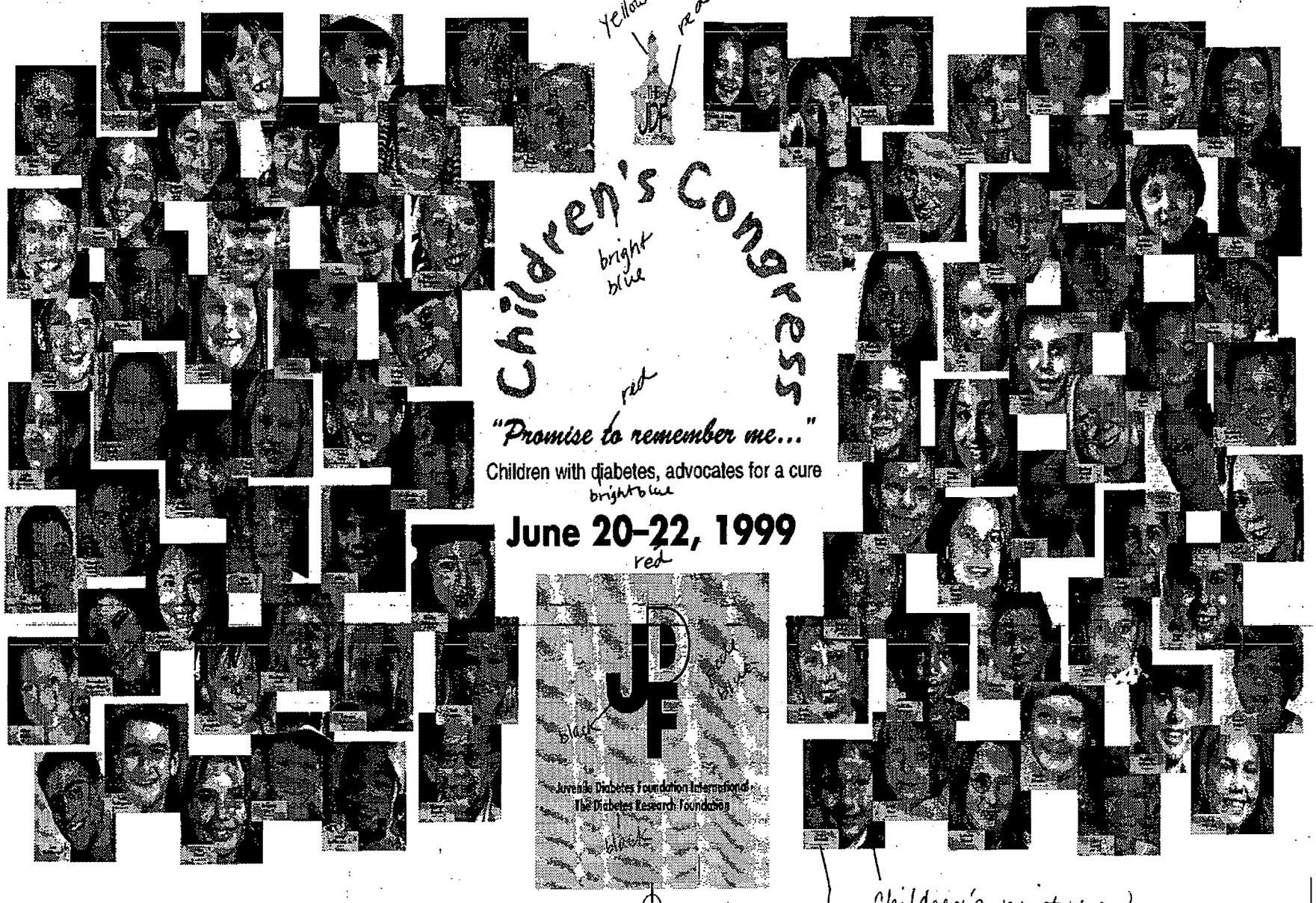
Many thanks for your help. Please call if you have any questions.

Sincerely,

Sally T. Lippincott

Juvenile Diabetes Foundation International
The Diabetes Research Foundation

The JDF Children's Congress™ 1320 Old Chain Bridge Road, Suite 330 McLean, VA 22101
703-556-4245 www.jdfcwo.org/promise



dimensions - 8' x 16'

JUVENILE DIABETES
June 7, 1999

NIH Funding

The FY 2000 Budget proposes $15.9 billion for NIH -- a $320 million (2%) increase above the FY 1999 level. Last year, the President proposed that the funding for the National Institutes of Health increase by nearly 50 percent over five years. The FY 2000 Budget puts us on path to meet this commitment.

From 1997 to 1999, NIH increased funding for diabetes-related research by approximately 40 percent, from $320 million to $449 million. The FY 2000 Budget for NIH proposes $460 million for research on diabetes. In addition, the Administration strongly supported a dedicated stream of funding -- $300 million over five years -- for diabetes research, prevention, and related health services in the Balanced Budget Agreement. This money will support research at NIH on juvenile diabetes.

Juvenile Diabetes Facts

- Juvenile Diabetes, or Type I diabetes, is caused by autoimmune destruction of insulin-producing beta cells in the pancreas. This process leads to a deficiency of insulin, and as a result individuals with Type I need to take injected insulin. Advocates for diabetes research – including the Juvenile Diabetes Foundation (JDF) – argue strongly that insulin-injection is not a cure for diabetes, and that research is vital to find a cure for the disease.

- Diabetes effects 16 million Americans, or between 6 and 7 percent or the population. Of these, one-third do not even know they have the disease.

- The number of people with diabetes continues to grow by nearly 800,000 persons each year, and will reach 23 million in 10 years, unless drastic changes occur.

- Over 13,000 new cases of Type I diabetes are diagnosed each year in the U.S. in children and young adults under age 20, representing about .3 percent of this population.

- Children with diabetes are most prone to acute complications such as coma, and must endure lifelong treatment and related physical and psychological complications. The prevalence of Type I diabetes in the pediatric population has risen steadily over the last 50 years.

- Diabetes disproportionately impacts children, women, the elderly, African Americans, Hispanic Americans, Native Americans, and Asian and Pacific Islander Americans.

- All forms of diabetes can cause blindness, kidney failure, changes in the ability of nerves to function normally, heart attacks, strokes, coma, and other complications.

- At a time when medical research is having a major impact in reducing death rates due to cardiovascular disease and stroke, the age-adjusted death rate due to diabetes has increase 30 percent.

- Life expectancy averages up to 15 years less in people with diabetes.

- In 1997, conservative estimates placed the cost of diabetes in the U.S. at $98.2 billion annually, and based on modest calculations, the number is estimated at $105 billion today. More than one of every ten U.S. health dollars, and about one of every four Medicare dollars, is spent for the care of people with diabetes.

- Maternal mortality, which was once greater than 50 percent in pregnant women with diabetes, has been nearly eliminated by insulin-replacement and other therapies. Perinatal infant mortality rates have fallen from more than 50 percent to three to five percent in pregnancies complicated by preexisting diabetes.

Diabetes Research

In 1998, the Diabetes Research Working Group (DRWG), established at the direction of Congress, first convened to develop plans for diabetes research. The DRWG notes extremely promising scientific prospects, and urges bold action, and strong financial support of research, that could save thousands of lives. The Strategic Plan for diabetes developed by the DRWG sets the goal of developing new approaches for prevention, cure, and improved treatment of all forms of diabetes and their complications.

[Source: "Conquering Diabetes: A Strategic Plan for the 21st Century, Diabetes Research Working Group, 1999]

Upcoming NIH initiative with potential benefits for diabetes research

- Just last week, the media reported on a remarkable research advance – scientists had essentially cured diabetes in monkeys. They transplanted the monkeys with insulin-producing cells and treated them with an experimental drug that prevented rejection of the transplanted tissue.

- The drug blocks a specific immune response involved in transplant rejection. This approach promises to eliminate the need for drugs that suppress the entire immune system, drugs that have serious side effects and leave transplant recipients vulnerable to infections. It also would increase the likelihood that individuals who need transplants will find suitably matched organs.

- This strategy of turning off specific, unwanted immune responses is the product of more than two decades of NIH research. In addition to revolutionizing transplantation, this strategy, which scientists call "immune tolerance" should result in treatments for autoimmune diseases.

- The NIH will soon award a seven-year, $120 million contract to capitalize on the striking advances that have been made in immune tolerance research. The contract will support the NIAID Network for Clinical Research on Immune Tolerance, an international consortium of investigators who will conduct clinical trials of tolerance-inducing therapies for transplantation and autoimmune diseases.

- Funding for this consortium was made possible, in part, by the recent Congressional interest in autoimmune diseases and the allocation of an additional $30M in FY 1999 to NIH for research in this area.

Lay Explanation of First Lady's Research Announcement

Type 1 diabetes (or insulin-dependent diabetes) results from a combination of inherited susceptibility (*i.e.*, genetic predisposition) and exposure to an environmental trigger (*e.g.*, a virus or environmental exposure, though the precise trigger or set of triggers is not known). The genetic predisposition is necessary for development of the disease, but is not the cause. The combination of genetic predisposition and environmental trigger results in a signal to the body's immune system to destroy the insulin-producing islet cells of the pancreas. The islet cells are responsible for production and regulation of the hormone insulin, which enables one to metabolize glucose and turn it into energy. People with Type 1 diabetes must take injections of insulin to stay alive.

This sequence of events – genetic susceptibility plus exposure to an environmental trigger, followed by an abnormal immune response – is common not only to Type 1 diabetes, but also to other so-called autoimmune diseases such as lupus, multiple sclerosis and rheumatoid arthritis. With each of these diseases, the destructive immune response affects different body organs. If we were to discover how to eliminate or control this autoimmune response, we could presumably treat many different autoimmune diseases.

In recent years, scientists have discovered that they can produce very specific "blocking" antibodies that can prevent the autoimmune response from occurring while leaving the rest of the immune system unaffected. This is called "tolerance induction", which consists of instructing the immune system to respond, or not respond, when a trigger is present. If the immune response is turned "off", the destruction of tissues such as islet cells can be avoided.

Applying this knowledge in experimental human clinical trials to learn more about which "blocking" antibodies are effective and the safety of such agents would represent a major advance in treatment and prevention of Type 1 diabetes and other autoimmune diseases. The NIAID research initiative is designed to foster collaborative clinical trials in autoimmune diseases, including Type 1 diabetes, with the goal of bringing these potential drugs into clinical use.

In addition, the ability to induce tolerance (or instruct the immune system not to respond destructively) is also important in preventing organ rejection following whole organ transplants. For example, people who currently receive kidney transplants must take highly toxic immunosuppressive drugs to prevent organ rejection. Although kidney transplantation is quite successful, the long-term use of immunosuppressive drugs can cause serious side effects.

Scientists have discovered certain blocking agents that show promise in stopping the immune system from rejecting an organ. This would permit transplant recipients to receive organs with specific treatments that would eliminate toxic side effects. This would be important not only for organ transplant recipients, but also for people with

diabetes receiving islet cell transplants.

In a person who already has Type 1 diabetes, it is unfortunately too late to prevent the damage. One possible solution to restoring normal islet cell function is to transplant healthy insulin-producing islets into people with Type 1 diabetes. To date, these transplants have not been very successful in part due to the current need to use toxic immunosuppressive drugs. New drugs that are more targeted in blocking rejection and that produce no, or minimal, side effects would be a major scientific advance in organ transplants and islet cell transplantation for people with diabetes.

The NIAID research initiative is designed to carry out the necessary clinical trials in humans in order to learn which agents will be successful and possible side effects. The knowledge gained from these clinical trials will also be applied to all people suffering from, or at risk for, autoimmune disease, as well as those receiving whole organ transplants.

Prepared by Juvenile Diabetes Foundation International
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EMBARGOED 6/7/99 - 2:30 p.m.

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FOR IMMEDIATE RELEASE **JUNE 7, 1999**

FIRST LADY HILLARY RODHAM CLINTON ANNOUNCES $120 MILLION CONTRACT FOR CLINICAL TRIALS ON IMMUNE TOLERANCE

New Studies will Speed the Path for a Cure for Juvenile Diabetes

WASHINGTON, DC – First Lady Hillary Rodham Clinton today announced that the National Institute of Allergy and Infectious Diseases (NIAID) of the National Institutes of Health (NIH) will award a $120 million, multi year contract to support new clinical trials on immune tolerance, a move which will speed the path for a cure for juvenile diabetes and other autoimmune diseases.

Clinton, who made the announcement in conjunction with the Juvenile Diabetes Foundation International to kick-off its first-ever JDF Children's Congress, said the new contract will provide research dollars for developing and testing medications that can induce the immune system that would otherwise reject transplanted tissues (graft rejection) to accept this tissue by rendering the recipient "tolerant" to the transplanted tissue. The studies represent a critical step

"This initiative is a tremendous step forward in our efforts to find a cure for juvenile diabetes," Mrs. Clinton said. "We hope that these new investments can help people with diabetes live longer, healthier, happier lives."

Researchers have been searching for ways to carry out islet cell transplants without the need for long-term anti-rejection drugs, which are often toxic and harmful. The NIAID Network for Clinical Research on Immune Tolerance will develop and conduct clinical trials of new therapies that promise to diminish or eliminate the need for anti-rejection therapy. In addition to preventing rejection, these same medications could stop or prevent the autoimmune reaction responsible for destroying the insulin-producing islet cells in Type 1 diabetes and could also be effective in other autoimmune disease such as systematic lupus erythematosus, rheumatoid arthritis, and multiple sclerosis.

"This contract for new research dollars is a vital step in putting a cure for Type 1 diabetes on a fast track," said JDF International Chairman Mary Tyler Moore. "It is critical to the more than 1 million Americans with Type 1 diabetes like me, who must take multiple shots of insulin each day just to survive. Some people don't even know diabetes is deadly and insulin is not a cure."

Moore said the White House announcement served as "a triumphant kick-off" to the JDF's first Children's Congress slated for June 20 to 22. She said children with diabetes representing the 50 states will make a pilgrimage to Washington to advocate for a cure for diabetes by testifying before the Labor, HHS, Education Subcommittee of the Senate Appropriations Committee.

"The NIAID Network for Clinical Research on Immune Tolerance will bring cutting-edge immunology research and promising therapies to people with diabetes and other autoimmune diseases," said Anthony S. Fauci, M.D., Director of NIAID at the NIH. "This initiative is an example of the continuing NIH commitment to partnerships that maximize the impact of our research dollars with private foundations such as the Juvenile Diabetes Foundation as well as with colleagues in academia and industry."

Diabetes is a debilitating disease which afflicts 16 million Americans; over one million of whom have juvenile, or Type 1, diabetes -- the most severe form. A new case of diabetes is diagnosed every 40 seconds. Diabetes kills one American every three minutes. Insulin is not a cure and does not prevent a future of life-threatening complications like blindness, heart attacks, strokes, amputations and kidney failure.

The Juvenile Diabetes Foundation is the world's leading nonprofit, non-governmental funder of diabetes research. It was founded in 1970 by parents or children with diabetes. Since its inception, JDF has given more than $290 million to diabetes research worldwide. JDF's mission is to find a cure for diabetes and its complications through the support of research. It awards research grants for laboratory and clinical investigations and sponsors a variety of career development and research training programs for new and established investigators. JDF also sponsors international workshops and conferences for biomedical researchers. Local JDF chapters offer information and other activities for families affected by diabetes. For more information, visit our website: www.jdf.org or call 800-JDF-CURE, ext. 536.

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Editor's note: Photos are available from the Associated Press Photo Network and on the Internet at www.newscom.com.

Eric Angel	62608	Has a quick question, no need to stop by, just give him a call at your convenience
Frank Conklin (Eagle Van Lines)	301-312-1400	Please call back

REQUEST FOR PARKING

OFFICIAL APPOINTMENT *on West Executive Avenue*

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Date Parking Needed: June 7 1999. **Time:** ARRIVAL 2:00pm DEPARTURE 3:30pm

Name of Driver: Frank Ford

Names of Passengers:
Mary Tyler Moore
S. Robert Levine
Karen Brawley

Reason Parking Needed: Event w/ First Lady

Make of Car: Black Lincoln Town Car

State and License #: Virginia 2CS-5785

Requester's Name/Contact Person: Ruby Shamir

Requester's Office: First Lady's Office

Phone Extention: 65696

* All information must be provided.
* It is the requesting office's responsibility to contact WAVES to clear in the driver and all passengers in the car.
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JDF Children's Congress/White House Event
June 21, 1999 or TBD

JDF Children's Congress

The Juvenile Diabetes Foundation International (JDF) will host the first-ever JDF Children's Congress June 20 to 22. One hundred children with diabetes will come to Washington, D.C. to tell policymakers about life with diabetes and why a cure is needed. The JDF Children's Congress includes a nationwide grassroots campaign, working with the millions of Americans affected by diabetes. Plans for the event include having the children participate in a Congressional hearing on the issue of children with diabetes, attend a Congressional luncheon, and, as proposed below, a White House event and announcement with the President and First Lady.

Background

In 1997, President Clinton signed the Balanced Budget Act of 1997. The bill included a number of critical provisions to speed our path to a cure for diabetes and improve the lives of individuals living with the disease. Specifically, the BBA provided $150 million for Type 1 diabetes research over five years, $150 million for Native American diabetes research and treatment over five years, $30 million for diabetes telemedicine over five years, and Medicare coverage for blood-glucose testing supplies, as well as diabetes education.

In addition, in 1998, President Clinton signed the FY1999 Labor, HHS, Education Appropriations Bill which included a historic, bipartisan 15-percent increase in National Institutes of Health (NIH) funding. This is seen by many as the first step towards doubling NIH funding over five years. The legislation also included a $30 million initiative to battle autoimmune diseases, including Type 1 diabetes.

The JDF Children's Congress will offer the President and the First Lady an opportunity to capitalize on these notable past investments of the Administration with a focused initiative to move results of diabetes research from the laboratory bench to the patient's bedside, moving ever more quickly to find a cure for all children with diabetes who, with their families, struggle with this disease every day.

White House Event: Meeting with Children and Establishment of Regional Islet Cell Replacement Centers

A White House event with the JDF Children's Congress kids and the President and First Lady could draw public awareness to the issue of diabetes and its impact on children and their families. In addition, the event could include an announcement of a new research initiative—such as Regional Centers for Islet Cell Replacement—that will speed the path to a cure for all of the children and others who suffer from diabetes.

Type 1, or juvenile, diabetes is caused by the autoimmune destruction of the insulin-producing islet cells of the pancreas. Type 1 diabetes is usually, though not always, diagnosed in childhood.

The availability of a true and permanent biologic replacement for lack of insulin secretion in Type 1 diabetes would for many people represent the equivalent of a "cure," resulting in freedom from insulin injections, glucose testing, dietary restrictions, and significant reduction or elimination of dreaded complications.

One of the most promising avenues to cure diabetes is through replacement of the destroyed islet cells with fully functioning islet cells. The Congressionally mandated Diabetes Research Working Group (DRWG) will issue a report later this year calling for a series of Regional Centers for Islet Cell transplantation which will chart a path to a cure. The DRWG report will state that the establishment of Islet Cell Replacement Centers is an area of extraordinary opportunity in the effort to find a cure. The Centers would emphasize the translation of basic research findings to clinical application to humans and eventually a cure.

The time is right for a significant expansion into this area of research. Although islet cell replacement procedures to this point have rarely been successful, recent focused trials using state of the art medicines and techniques are showing promising results that a cure through this procedure could be possible. The creation of regional centers for islet cell replacement is the next step in the effort to perfect this procedure so that children and adults with diabetes would no longer face a lifetime with this devastating illness.

Among the possible areas of emphasis, the Regional Centers for Islet Cell transplantation could focus on the following:

- clinical trials in humans of islet transplantation in appropriate clinical groups, including trials with novel forms of immune suppression
- studies to identify prospectively individuals in whom islet transplantation will be successful
- studies to understand/prevent the mechanisms leading to destruction of transplanted beta cells, including cellular and soluble factors involved in this process
- studies to improve techniques for isolation, maintenance, and propagation of human islets or beta cells
- basic and applied studies to determine the mechanisms and develop strategies for prevention of recurrent autoimmunity
- preclinical trials in appropriate animals with use of strategies to prevent alloimmunity without long-term immunosuppression
- development of immunobarrier technology that will be beneficial in protecting either normal islet cells or engineered insulin-producing cells from rejection and autoimmunity
- studies of materials and device design for encapsulation
- studies of function of islets in immunobarrier devices

Prepared February 4, 1999
Juvenile Diabetes Foundation International
202-371-9746 x. 12

June 20–June 22, 1999

Washington, DC

Alan & Sandra Silvestri & Family, Chairfamily, JDF Children's Congress

Mary Tyler Moore, International Chairman, JDF

Congressional Co-chairs
The Hon. Arlen Specter, U.S. Senate
The Hon. Harry Reid, U.S. Senate
The Hon. George R. Nethercutt, Jr., U.S. House of Representatives
The Hon. Diana DeGette, U.S. House of Representatives

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THE JDF Children's Congress

"Promise to remember me..."

Dear Moms, Dads, Grandparents & Guardians:

I am writing to invite your family to participate in an exciting and important event. The Juvenile Diabetes Foundation's first Children's Congress will be held in Washington, D.C. from Sunday, June 20 to Tuesday, June 22, 1999. It's a chance to tell your Member of Congress what it's like to have diabetes, or to have a child with diabetes, and that we want a cure.

As Chair of the JDF Children's Congress, I will be attending with my eight-year-old son, Joey, who has had diabetes since the age of two. As the mother of a child with diabetes, I know there is no voice more powerful than the voice of my son when he asks, "Why do I have to stick my finger to test my blood five times a day? Why do I have to take an insulin shot? Why do I have diabetes, Mom?" No one understands better than Joey that "insulin is not a cure." We hope the Children's Congress will provide an opportunity for all our voices to be heard.

The JDF Children's Congress is the first event of its kind, designed to educate Washington leadership about the issues surrounding children who live with diabetes. Our theme, "Promise to remember me," will be a powerful call to action, asking lawmakers to remember children with diabetes when appropriating funds for medical research.

Led by JDF International Chairman Mary Tyler Moore, a select group of children from throughout the country will come to Washington, D.C. to participate in special events created to reach out to Members of Congress and the Administration to advocate for a cure for diabetes and its complications (see Letter of Thanks to those who applied to be delegates). The children will participate in an event on Capitol Hill to enhance Congressional awareness of children with diabetes, attend a luncheon with Members of Congress, and interact with senior Administration officials in a high-profile event. We expect to attract broad-based national and local media interest, which will help to increase public awareness about the disease's impact on children with diabetes and the urgent need for a cure.

We need your help to illustrate the personal impact of diabetes on millions of Americans by bringing real faces and stories of children with diabetes to the attention of Washington lawmakers. Please take a moment to write a letter from your child to your Member of Congress relating his or her story of what it's like to live with diabetes and why a cure is needed. Family and friends may also write in support of JDF Children's Congress and the need for increased funding for research to find a cure.

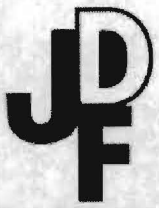
Help us make sure all our children's voices are heard. The more letters we receive, the more impact we will have on increasing funding for diabetes and its complications.

All letters should be sent to

The JDF Children's Congress
1320 Old Chain Bridge Road, Suite 330
McLean, VA 22101.
Or, continue to the Advocacy Form to send a letter electronically.
See also: Children's Congress Handout and Form Letter to Congress (pdf files).

Sincerely,

Sandra D. Silvestri
Chairman, JDF Children's Congress



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Juvenile Diabetes Foundation International
The Diabetes Research Foundation

JDF's Mission Is to Find a Cure for Diabetes and Its Complications through the Support of Research

What Is the Juvenile Diabetes Foundation International

Print-friendly Format:
Download *What Is JDF?* in Portable Document Format.

The Juvenile Diabetes Foundation International (JDF) is the world's leading nonprofit, nongovernmental funder of diabetes research. It was founded in 1970 by parents of children with diabetes. JDF's mission is to find a cure for diabetes and its complications through the support of research.

The Only Remedy Is a Cure

- Insulin is not a cure for diabetes.
- The needs of people with diabetes determine the focus and direction of JDF research.
- JDF's business-oriented approach to funding research is designed to bring about a fast-track application of research results to people with the disease.

Devoted to Finding a Cure

- This very focused goal and orientation has permeated every activity of JDF over the past 28 years.
- Since its founding in 1970, JDF has spent more resources on diabetes research than any other nonprofit, nongovernmental agency in the world.

Our Only Hope Is Research

Our research is driven by three goals:

1. Restoring normal blood glucose,
2. Preventing and reversing diabetes-related complications, and
3. Preventing diabetes and its recurrence.

Dedicated and Active Volunteers Are Backbone of JDF

- Volunteers help define research priorities, select grant recipients, lead advocacy efforts, and provide guidance to overall operations.
- Since 1970, JDF has developed nearly 100 chapters and affiliates worldwide, whose volunteers have helped to provide $290 million to JDF-funded diabetes research.
- In 1998-1999, JDF will award more than $50 million for diabetes research worldwide, and by the year 2003, we will award a projected $100 million annually.
- Volunteers help raise funds through our national "The Only Remedy Is a Cure Campaign," our "Walk to Cure Diabetes,"

held in over 200 cities around the world, as well as through golf tournaments, celebrity dinners, auctions, and special events.

Lean and Efficient Organization

- At least 80 cents of every dollar goes directly to research and education.
- The *Wall Street Journal*'s *Smart Money Magazine* named JDF one of the nation's top 10 charities "you can trust" (12/97) and 1 of only 2 charities in the health field.
- The American Institute of Philanthropy has given JDF an "A" rating, the only such rating for any national diabetes organization.

In our mission to find a cure we collaborate with all diabetes stakeholders, including

- Individuals with diabetes and their families;
- World-leading diabetes researchers and academic institutions;
- Foundations, corporate partners, individual donors, and volunteers;
- Government agencies such as the National Institutes of Health (NIH), the National Aeronautics and Space Administration (NASA), and the Department of Veterans Affairs;
- The Medical Research Councils of Australia, Canada, and Sweden;
- Biotech/pharmaceutical industries.

MISSION POSSIBLE CURE

Join JDF in San Francisco for our 29th Annual Conference, June 3–6, 1999

The Juvenile Diabetes Foundation (JDF) International was founded in 1970 by parents of children with diabetes. Their mission: to find a cure for the disease within their children's lifetime through the support of research. Commitment to this mission by JDF will be more than $50 million this year, for a cumulative total of over $300 million—more money for diabetes research than any other nonprofit, nongovernmental health agency in the world. (See About JDF for more information.)

Juvenile Diabetes Foundation International

The Diabetes Research Foundation

JDF's Mission Is to Find a Cure for Diabetes and Its Complications through the Support of Research

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Diabetes Facts

What Is Diabetes?

Print-friendly Format:
Download *Diabetes Facts*, in Portable Document Format.

Diabetes is a chronic, genetically determined, debilitating disease affecting every organ system. Insulin is not a cure, but merely life support. There are two major types of diabetes: Type 1 and Type 2. Type 1 (juvenile) is caused by the autoimmune destruction of the insulin-producing cells of the pancreas and is usually, though not always, diagnosed in childhood. People with Type 1 must take insulin to live. People with Type 2 produce insulin, but their bodies do not use it effectively. Type 2 is usually diagnosed in adulthood.

Affects Millions

- Diabetes kills one American every three minutes.
- Sixteen million Americans have the disease; of these, 5.4 million are undiagnosed.
- Diabetes afflicts 120 million people worldwide, and the World Health Organization (WHO) estimates this number will skyrocket to 300 million by the year 2025.
- A new case of diabetes is diagnosed every 40 seconds.
- Taking insulin does not cure the disease nor prevent the development of complications.

Leading Cause of Death

- Diabetes is the leading cause of kidney failure, adult blindness, and nontraumatic amputations.
- People with diabetes are two to four times more likely to have a heart attack or stroke.
- Life expectancy of people with diabetes averages 15 years less than that of people without diabetes.
- Diabetes is a leading cause of nerve damage.
- Death rate among infants born to mothers with diabetes is two to three times as high as for women without diabetes.

Single Most Costly Chronic Disease

- Diabetes accounts for $98 billion in annual U.S. health-care costs.
- One of every five Medicare dollars goes to pay for the health care of people with the disease.
- Average lifetime cost of diabetes care for a person diagnosed at age three is calculated at $600,000 in today's dollars.