

CEK  
18/14

WORKING WITH PERSONS WITH AIDS

BY  
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PRESENTED TO EMPLOYEES OF SOUTHWEST BELL  
SAN ANTONIO, TEXAS

JANUARY 26, 1989

\*\*\* DO NOT DISTRIBUTE \*\*\*

(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

I APPRECIATE THIS OPPORTUNITY TO TALK TO THE ~~MANAGEMENT~~  
PERSONNEL OF ~~THE BATTLE~~ SOUTHWEST BELL

FIRST OF ALL, I THINK IT'S IMPORTANT FOR ALL MANAGERS ~~IN THE~~  
~~FEDERAL SERVICE~~ TO PLACE A HIGH PRIORITY ON THE HEALTH NEEDS OF  
THEIR WORKFORCE -- AND ON THEIR OWN HEALTH NEEDS AS WELL.

SECONDLY, OF COURSE, YOU AND I ARE INVOLVED -- IN DIFFERENT  
WAYS, TO BE SURE -- BUT WE'RE BOTH INVOLVED WITH ~~THREE VERY BIG~~  
~~INDUSTRIES IN THE UNITED STATES: TOBACCO, ALCOHOL, AND FIREARMS.~~  
SOME OF THE THREATS TO THE  
HEALTH AND WELL-BEING OF  
OUR CITIZENS

MY PREOCCUPATION WITH TOBACCO YOU MIGHT SAY "CAME WITH THE TERRITORY." THE ANNUAL "SMOKING AND HEALTH" REPORT OF THE SURGEON GENERAL IS, I WOULD HOPE, A FAMILIAR VOLUME TO ALL OF YOU ... PROMINENTLY DISPLAYED IN YOUR BOOKSHELVES AND ON THE LITTLE TABLES IN YOUR OUTER OFFICES, ALONG WITH TIME, NEWSWEEK, ~~AND THE FEDERAL REGISTER~~.

BY THE WAY, I BELIEVE THAT THE <sup>1988</sup>~~EARLIEST~~ REPORT, RELEASED THIS PAST SUMMER, IS ONE OF THE MOST IMPORTANT -- POSSIBLY THE MOST IMPORTANT REPORT -- SINCE THE FIRST ONE THAT CAME OUT IN 1964.

THAT

THE MOST RECENT REPORT CLEARLY IDENTIFIED NICOTINE AS AN ADDICTIVE DRUG ... ONE THAT PRODUCES CERTAIN EFFECTS UPON THE HUMAN NEUROMUSCULAR AND CARDIOVASCULAR SYSTEMS, EFFECTS THAT ARE SIMILAR TO THOSE PRODUCED BY SUCH OTHER ADDICTIVE DRUGS AS COCAINE AND HEROIN.

1988

IT'S ALL IN THAT ~~LATEST~~ REPORT.



IF YOU DON'T HAVE A COPY, I ENCOURAGE YOU TO ORDER ONE TODAY FROM OUR NATIONAL CLEARINGHOUSE ON SMOKING AND HEALTH.

MY 1989 REPORT WAS RELEASED ON JAN 11 - THE 25<sup>th</sup> ANNIVERSARY OF THE FIRST REPORT TO THE SG IN 1964

MAJOR POINTS:

SMOKING ↓ > 50 to < 29

REMOVED UPWARD MORTALITY TO 390,000/Y

RISK: LUNG CA MEN 22.4X (10)  
WOMEN 11.9X (4)

CORONARY ♂ < 65 2.8  
♀ < 65 3.0

\* STROKE ♂ 3.7  
< 65 ♀ 4.1

I GET A LOT OF CRITICAL MAIL BECAUSE  
~~AS FOR ALCOHOL~~ AS I HAVEN'T HAD ~~BE~~ MUCH TO SAY ABOUT ~~ALCOHOL~~

ALTHOUGH ONE OF MY FIRST ACTS, SOON AFTER BECOMING SURGEON  
GENERAL ~~EXACTLY~~ 7 YEARS AGO, WAS TO ISSUE A WARNING TO PREGNANT  
WOMEN, ADVISING THEM TO CUT DOWN ON ALCOHOL CONSUMPTION DURING  
PREGNANCY BECAUSE OF THE HIGH RISK OF FETAL ALCOHOL SYNDROME.

THIS SYNDROME MAY APPEAR AS ONE OF ANY NUMBER OF PHYSICAL  
AND MENTAL ABNORMALITIES IN THE DEVELOPING FETUS ... SEVERE  
FACIAL OR CRANIAL DISFIGUREMENT, FOR EXAMPLE, OR PROFOUND MENTAL  
RETARDATION, AND SO ON.

RECENTLY, THE SECRETARY OF OUR DEPARTMENT OF HEALTH AND HUMAN SERVICES, DR. OTIS R. BOWEN, LAUNCHED AN INITIATIVE AGAINST ALCOHOLISM AND ALCOHOL ABUSE. AS A MEMBER OF DR. BOWEN'S H.H.S. TEAM, I ~~AM~~ <sup>ED</sup> WORKING ~~ING~~ CLOSELY WITH HIM ON THAT INITIATIVE.

MY SPECIAL INTEREST IS IN DRUNK DRIVING AND THE ENORMOUS IMPACT IT HAS ON OUR PUBLIC HEALTH STATUS, NOT ONLY IN TERMS OF MORTALITY, WHICH IS BAD ENOUGH -- 24,000 DEATHS A YEAR -- BUT ALSO IN TERMS OF MORBIDITY ... THE LINGERING PHYSICAL HANDICAPS, SPINAL CORD INJURIES, THE BRAIN DAMAGE, AND SO ON ... THE KINDS OF TRAUMA THAT STRIKE OVER A HALF-MILLION VICTIMS OF ALCOHOL-RELATED HIGHWAY AND VEHICULAR ACCIDENTS EACH YEAR.

HELD

ON DECEMBER 14, ~~HERE~~ IN WASHINGTON, I ~~WILL~~ OPEN A THREE-DAY  
 "SURGEON GENERAL'S WORKSHOP ON DRUNK DRIVING." ~~I HOPE THAT THE~~  
~~MANAGEMENT OF THE B.A.T.F. WILL TAKE NOTE OF THOSE PROCEEDINGS.~~

~~FINALLY, THERE'S THE FIREARMS INDUSTRY.~~

~~THE PUBLIC HEALTH SERVICE DOES NOT HAVE A POLICY OR PROGRAM  
 IN REFERENCE TO FIREARMS. BUT WE DO HAVE AN INTEREST IN THE  
 ESCALATING RATES OF MORTALITY AND MORBIDITY PRODUCED BY VIOLENT  
 MEANS, WHETHER THOSE MEANS ARE KNIVES, GUNS, CLUBS, OR HUMAN  
 HANDS.~~

✓  
 THE BEER DISTRIBUTORS, THE ~~MANUFACTURERS~~  
~~OF~~ ADVERTISERS, AND THE BRANDOWNERS  
 DID THEIR BEST TO STOP IT.  
 THEY FAILED AND THIS SPRING  
 I WILL RELEASE THE FINDINGS OF  
 THAT WORKSHOP, THE RECOMMENDATIONS  
 TO ME BY THE PARTICIPANTS,  
 MY RESPONSE AND THE ACTION  
 PLAN FOR THE FUTURE.

THREE YEARS AGO I CONVENED A "SURGEON GENERAL'S WORKSHOP ON VIOLENCE AND PUBLIC HEALTH" AND PLACED THE ISSUE OF INTERPERSONAL VIOLENCE -- ESPECIALLY FAMILY VIOLENCE -- SQUARELY ON THE PUBLIC HEALTH AGENDA OF THIS NATION.

I'M PROUD OF HAVING DONE THAT, BECAUSE I THINK THAT PUBLIC HEALTH PEOPLE, ONCE THEY BECOME SENSITIZED TO THE ISSUE, CAN DO MUCH TO LOWER THE LEVELS OF VIOLENCE IN THE FAMILIES AND COMMUNITIES OF AMERICA.

AT ANY RATE, DESPITE THE DIFFERENT MISSIONS OF OUR RESPECTIVE ORGANIZATIONS, YOU AND I DO HAVE A FEW ISSUES IN COMMON.

THIS YEAR WE'RE  
FOCUSING ON THE SUBHEADING  
OF SPOUSE ABUSE.



8 I'M GOING

FOR TODAY, HOWEVER, ~~DIRECTOR HISSING ASKED ME~~ TO FOCUS ON A  
PROBLEM THAT MIGHT WELL BE -- AGAIN, FOR ~~BOTH~~ <sup>ALL</sup> OF US ... AND FOR  
THE COUNTRY -- ONE OF THE MOST DIFFICULT PROBLEMS WE'VE EVER HAD  
TO FACE.

OF COURSE, I'M TALKING ABOUT AIDS.

AIDS IS NOT JUST A DISEASE AFFECTING THE BODIES AND MINDS OF  
A FEW THOUSAND PEOPLE. IF YOU LOOK AT NUMBERS ALONE, YOU'LL MISS  
THE REAL STORY OF THIS DISEASE, FOR AIDS HAS BURROWED ITS WAY  
INTO THE VERY FABRIC OF AMERICAN SOCIETY.

UNLESS WE RECOGNIZE THE EXTENSIVE AND PERMANENT DAMAGE IT CAN DO THERE, WE'RE GOING TO LOSE MORE THAN HUMAN LIVES. WE'LL LOSE THE MORAL AND ETHICAL STRENGTH THAT HAS KEPT OUR NATION TOGETHER FOR OVER 200 YEARS.

I'M NOT READY TO RUN THAT KIND OF RISK. AND I DON'T BELIEVE YOU ARE EITHER.

*WORK-A-DAY*

AS CITIZENS AND AS DECISION-MAKERS IN THE ~~FEDERAL CIVILIAN~~  
*WORK* ~~SERVICE~~, WE'VE GOT A TWO-FOLD JOB:

FIRST, WE'VE GOT TO DO WHATEVER WE CAN TO SAVE THOSE  
INDIVIDUAL HUMAN LIVES THAT ARE AT RISK OF AIDS -- AND THAT  
MEANS EDUCATION AND PREVENTION IN THE WORKPLACE ...

AND SECOND, WE'VE GOT TO SAVE OUR SENSE OF NATIONAL UNITY  
AND PURPOSE, WHICH ARE ALSO AT RISK.

AM I OVER-STATING THE CASE? NO, I DON'T BELIEVE I AM. AND  
THE REASON LIES IN THE BASIC INFORMATION WE HAVE ABOUT THIS  
DISEASE SO FAR.

LET ME QUICKLY REVIEW THAT INFORMATION SO THAT WE'RE ALL OPERATING WITH THE SAME DATA. AND I SHOULD ADD THAT -- DESPITE ALL THE HOUSE-TO-HOUSE MAILINGS AND THE HEAVY PRESS COVERAGE OF THIS DISEASE OVER THE PAST FEW YEARS -- I'M POSITIVE THERE ARE STILL MANY PEOPLE RIGHT HERE IN THIS AUDIENCE WHO ARE STILL UNCLEAR ABOUT THE NATURE OF THE DISEASE OF AIDS.

THE FIRST THING TO KNOW IS THAT THE AIDS VIRUS IS STILL SPREADING, BOTH IN OUR COUNTRY AND WORLDWIDE. THAT'S THE PREMISE FOR EVERYTHING WE DO. WE'VE GOT A KILLER DISEASE ON OUR HANDS AND IT'S REACHING FARTHER AND DEEPER INTO OUR SOCIETY EVERY DAY.

OUR STATISTICIANS PREDICTED TWO YEARS AGO THAT THE AIDS EPIDEMIC WOULD CONTINUE TO GROW AND SPREAD WELL INTO THE 1990'S ... AND I'M AFRAID THEY WERE RIGHT.

OF 1984  
FOR EXAMPLE, IN THE SINGLE YEAR ~~THAT ENDED ON NOVEMBER 7~~, WE LOGGED IN OVER 3,000 NEW CASES HERE IN THE UNITED STATES.

SINCE THE FIRST 5 CASES WERE RECORDED IN LOS ANGELES BACK IN 1981, THAT CITY ALONE HAS REPORTED ANOTHER 5,780 CASES ... AND THE COUNTRY AS A WHOLE HAS HAD A TOTAL OF ALMOST 80,000 CASES OF AIDS.

I SAY "THE COUNTRY AS A WHOLE" BECAUSE BY NOW EVERY STATE AND TERRITORY OF THE UNITED STATES HAS BEEN TOUCHED BY THIS EPIDEMIC.

THAT'S THE SITUATION IN THE UNITED STATES ... AND IT'S BECOMING THE SITUATION WORLDWIDE AS WELL. SOME 140 COUNTRIES, IN ADDITION TO THE U.S.A., HAVE SO FAR REPORTED <sup>ABOUT</sup> 50,000 CASES OF AIDS ALL TOGETHER.

AND THAT COULD JUST BE THE TIP OF THE ICEBERG, GIVEN THE LOW STATE OF THE ART OF DATA-COLLECTING IN MOST COUNTRIES OF THE WORLD TODAY.

BUT THE CONTINUED EXPANSION OF THE AIDS EPIDEMIC IS ONLY PART OF THE STORY. THE OTHER PART IS EVEN MORE GRIM: AIDS IS VIRTUALLY 100 PERCENT FATAL. OF THOSE ~~28,000~~<sup>50,000</sup> AMERICANS WHO WERE REPORTED AS HAVING AIDS SO FAR, ~~45,000~~<sup>WELL OVER HALF</sup> HAVE DIED.

THAT'S AN OVERALL MORTALITY RATE OF 56 PERCENT.

BUT LET'S LOOK AT THOSE FIGURES MORE CLOSELY. OF THE NUMBER OF PEOPLE WITH AIDS IN 1981, SOME 92 PERCENT HAVE ALREADY DIED.

OF THOSE IN 1982, CLOSE TO 90 PERCENT HAVE DIED.

AND ALMOST HALF THE NUMBER OF PEOPLE WHO WERE REPORTED WITH AIDS JUST LAST YEAR HAVE ALREADY DIED.

SO, EVEN THOUGH WE DON'T KNOW EVERYTHING ABOUT THIS DISEASE, WE DO KNOW ONE THING FOR CERTAIN:

IF YOU HAVE AIDS, YOUR CHANCES OF SURVIVING THE NEXT TWO OR THREE YEARS ARE NOT VERY GOOD. BUT YOUR CHANCES OF SURVIVING ANY LONGER THAN THAT ARE ALMOST NIL.

ALL RIGHT, WHAT ARE WE DOING ABOUT IT?



FIRST OF ALL, WE'RE MOVING AHEAD ON VACCINE DEVELOPMENT. IN FACT, WE ALREADY HAVE TWO VACCINE MODELS GOING THROUGH THE VERY EARLIEST PHASES OF CLINICAL TESTING.

BUT THOSE ARE ONLY THE FIRST TINY STEPS IN VACCINE DEVELOPMENT. I CAN TELL YOU THAT IT'S GOING TO BE A VERY LONG PROCESS -- STRETCHING TO THE END OF THIS CENTURY AT THE VERY LEAST -- BEFORE WE COME UP WITH A SAFE, EFFECTIVE, AND READILY AVAILABLE VACCINE AGAINST AIDS. AND HONESTLY, I'M TRYING TO BE OPTIMISTIC ABOUT IT.

NOW, IT'S TRUE THAT WE HAVE A DRUG CALLED A.Z.T., WHICH SEEMS ABLE TO PROLONG THE LIVES OF MANY PERSONS WITH AIDS. AND SEVERAL OTHER DRUGS WITH THE SAME KIND OF PROMISE ARE IN THE PIPELINE.

BUT THESE DRUGS ONLY PROLONG A PERSON'S LIFE FOR A FEW MONTHS ... MAYBE A YEAR ... IF THEY WORK. THEY DO NOT CURE ANYONE OF AIDS ... NOR DO THEY CURE ANYONE OF ANY CONDITION BROUGHT ON BY AIDS.

THE HARD TRUTH IS STILL THIS: WE HAVE NO DRUG ... NO VACCINE ... NO "MAGIC BULLET" OF ANY KIND TO PREVENT AIDS OR STOP IT IN ITS TRACKS.

BUT WE'RE NOT AT A TOTAL LOSS ON THIS DISEASE. WE DO KNOW HOW THE AIDS VIRUS IS TRANSMITTED.

AIDS IS TRANSMITTED IN FOUR WAYS ... AND IN ONLY FOUR WAYS:

\* THE FIRST WAY, <sup>THE</sup> ~~IS~~ MOST COMMON ROUTE OF TRANSMISSION IS <sup>BY</sup> SEXUAL INTERCOURSE ... MOSTLY BUT NOT EXCLUSIVELY ANAL INTERCOURSE, WHICH OCCURS MOST FREQUENTLY AMONG HOMOSEXUALS AND BISEXUAL MALES. <sup>HAS</sup> THIS ACCOUNTS ~~FOR~~ ABOUT TWO-THIRDS OF ALL CASES OF AIDS.

BUT PLEASE REMEMBER THAT HOMOSEXUALITY ... BY ITSELF ...  
DOES NOT CAUSE AIDS, JUST AS HETEROSEXUALITY ... BY ITSELF  
...DOES NOT CAUSE SYPHILIS.

\* AIDS IS ALSO TRANSMITTED INTO THE BLOOD OF INTRAVENOUS  
DRUG ADDICTS WHO USE THE NEEDLES AND SYRINGES OF OTHER  
ADDICTS ALREADY INFECTED WITH AIDS VIRUS.

INCIDENTALLY, THROUGH THE HETEROSEXUAL ACTIVITIES OF  
INFECTED BISEXUAL MEN AND I.V. DRUG ABUSERS, THE VIRUS HAS  
SPREAD TO THE HETEROSEXUAL POPULATION. SO FAR, IT HAS  
REMAINED CONFINED, BUT WE CAN NEVER BE SURE IT WILL STAY  
PUT.

\* THE VIRUS CAN ALSO BE TRANSMITTED FROM AN AIDS-INFECTED MOTHER TO HER INFANT DURING PREGNANCY OR AT THE TIME OF DELIVERY.

WELL OVER 500K  
RIGHT NOW, THIS COUNTRY HAS ~~ABOUT~~ A THOUSAND BABIES  
NATIONWIDE ~~WHO WERE BORN SEROPOSITIVE ... THAT IS, TESTS~~  
~~MADE AT THE TIME OF BIRTH HAVE CONFIRMED THE PRESENCE OF THE~~  
~~AIDS VIRUS IN THEIR BLOODSTREAMS.~~

\* AND FINALLY, AIDS CAN BE TRANSMITTED THROUGH TRANSFUSED BLOOD OR BLOOD PRODUCTS. BUT THIS DANGER IS NOW ALMOST STATISTICALLY INSIGNIFICANT.

THE ODDS TODAY OF ANYONE GETTING A CONTAMINATED UNIT OF TRANSFUSED BLOOD ARE BETWEEN 1 IN 40,000 AND 1 IN 250,000. COMPARE THAT WITH, SAY, DEATH ON THE HIGHWAY, WHERE THE ODDS AGAINST YOU ARE AS BAD AS 1 IN ONLY 5,900.

RIGHT NOW, THEREFORE, THE GREAT MAJORITY OF OUR AIDS CASES -- ABOUT 9 OF EVERY 10 -- INVOLVE HOMOSEXUALS OR BISEXUAL MALES OR DRUG ABUSERS. IN OTHER WORDS, IF THESE TWO GROUPS SUDDENLY CHANGED THEIR HIGH-RISK BEHAVIOR, THE SOCIAL IMPACT OF THIS DISEASE WOULD EVENTUALLY PLUNGE BY 90 PERCENT.

I SAY "EVENTUALLY" BECAUSE OF THE LONG INCUBATION PERIOD AND THE FACT THAT THOSE PEOPLE CARRYING THE VIRUS -- PERHAPS ABOUT 1.5 MILLION PEOPLE -- STILL HAVE TO GO THROUGH THE COURSE OF THE DISEASE.

THESE, THEN, ARE THE FOUR KEY ASPECTS OF THE DISEASE OF AIDS:

ONE, THAT IT'S SPREADING ...

TWO, THAT IT'S FATAL...

THREE, THAT WE DON'T HAVE A CURE YET ...

AND FOUR, THAT IT'S SPREAD MAINLY BY CERTAIN SPECIFIC  
BEHAVIORS INVOLVING SEX AND/OR DRUGS.

THESE FOUR ASPECTS MAKE THE AMERICAN PEOPLE VERY EDGY ABOUT  
AIDS. AND THAT'S CERTAINLY UNDERSTANDABLE.

BUT LET'S KEEP OUR PRIORITIES STRAIGHT. WE NEED TO DO  
EVERYTHING WE CAN TO STOP THIS DISEASE IN ITS TRACKS. WE'RE  
FIGHTING A DISEASE, NOT THE PEOPLE WHO HAVE IT.



AS WE WAGE THAT FIGHT, WE DON'T HAVE TO COMPROMISE OUR FEELINGS ABOUT THE KIND OF BEHAVIOR THAT MAKES AIDS POSSIBLE. IN FACT, OUR BASIC WEAPON AGAINST AIDS -- EDUCATION -- IS DIRECTED RIGHT AT THOSE HIGH-RISK PATTERNS OF BEHAVIOR.

THAT'S THE APPROACH WE NEED TO TAKE, BOTH IN SCIENCE AND IN SOCIETY. IT'S THE SAME KIND OF TOUGH-MINDED APPROACH THAT WE'VE USED IN THE FIGHT AGAINST SMALLPOX AND SYPHILIS AND TYPHOID AND ALCOHOLISM AND A HUNDRED OTHER CONDITIONS ... MANY THAT ALSO REFLECT HIGH-RISK PERSONAL BEHAVIORS.

I SAID EDUCATION WAS OUR "BASIC WEAPON." ACTUALLY, IT'S OUR ONLY WEAPON. WE'VE GOT TO EDUCATE EVERYONE ABOUT THE DISEASE SO THAT EACH PERSON CAN TAKE RESPONSIBILITY FOR SEEING THAT IT IS SPREAD NO FURTHER.

AND WE OURSELVES ARE THE FIRST ONES WHO SHOULD GET THAT EDUCATION.

WE NEED TO KNOW HOW TO AVOID THE PHYSICAL DISEASE OF AIDS, AND I'VE ALREADY TALKED A LITTLE BUT ABOUT THAT. BUT WE ALSO NEED TO KNOW HOW TO AVOID THE EFFECTS OF THAT DISEASE NOT JUST UPON OUR BODIES, BUT ALSO UPON OUR THOUGHTS AND OUR FEELINGS AS COMPASSIONATE AND FAIR-MINDED CITIZENS.

FOR EXAMPLE, NO AMERICAN SHOULD CONSIDER HIMSELF OR HERSELF FREE TO USE THE FEAR OF AIDS AS A SHIELD BEHIND WHICH TO VIOLATE THE ETHICS OF EDUCATION OR MEDICINE OR ANY OTHER PROFESSION ... OR THE ACCEPTED ETHICS OF THE AMERICAN WORKPLACE, FOR THAT MATTER.

WE'VE SENT THAT MESSAGE TO EDUCATORS WHO ARE TEMPTED TO TURN AWAY STUDENTS WITH AIDS.

AND WE'VE SENT IT TO PHYSICIANS AND HOSPITAL ADMINISTRATORS WHO ARE TEMPTED TO TURN AWAY PATIENTS WITH AIDS.

AND WE'RE ALSO SENDING IT TO EMPLOYERS AND MANAGERS WHO ARE TEMPTED TO DISMISS ANY EMPLOYEE WITH AIDS.

THE MESSAGE HAS ALSO BEEN SENT BY THE SUPREME COURT OF THE UNITED STATES, THE PRESIDENT, AND BY THE ATTORNEY GENERAL. THEIR PARTICULAR MESSAGE HAS ALSO BEEN CONSISTENT AND CLEAR.

FIRST, THEY ALL HAVE AGREED THAT AIDS IS A "HANDICAPPING DISEASE." THE DEFINITION OF A "HANDICAPPING DISEASE," BRIEFLY, IS ANY PHYSICAL OR MENTAL IMPAIRMENT WHICH SUBSTANTIALLY LIMITS ONE OR MORE OF A PERSON'S MAJOR LIFE ACTIVITIES. THAT'S IT. AND AIDS IS NOW IN THAT COLUMN.

SECOND, THEY ALSO AGREE THAT A PERSON MAY BE INFECTED WITH THE AIDS VIRUS, YET SHOW NO CLINICAL SIGNS OR SYMPTOMS AND, IN EVERY OTHER WAY, BE ABLE TO FUNCTION NORMALLY AND ADEQUATELY ON THE JOB.

AND THIRD, THEY ALL AGREE THAT "HIV-INFECTED EMPLOYEES SHOULD BE ALLOWED TO CONTINUE WORKING AS LONG AS THEY ARE ABLE TO MAINTAIN ACCEPTABLE PERFORMANCE AND DO NOT POSE A SAFETY OR HEALTH THREAT TO THEMSELVES OR OTHERS IN THE WORKPLACE." THAT IS NOW FEDERAL POLICY.

AS I INDICATED EARLIER, A PERSON WITH AIDS HAS TO KNOWINGLY DO CERTAIN THINGS TO POSE A SPECIFIC "SAFETY OR HEALTH THREAT" TO OTHERS, SUCH AS PASSING ON THE VIRUS. THE TWO KEY THINGS WOULD BE SEXUAL INTERCOURSE, ESPECIALLY ANAL INTERCOURSE, AND THE SHARING OF NEEDLES WHILE "SHOOTING" DANGEROUS DRUGS.

MC)

BELIEVE ME, IF THOSE KINDS OF THINGS ARE GOING ON IN YOUR  
~~COMPANY~~ ORGANIZATION DURING THE NORMAL WORKDAY ... THEN, MY FRIENDS,  
AIDS IS THE LEAST OF YOUR PROBLEMS.

LET'S SAY THAT THAT'S NOT THE CASE IN YOUR ORGANIZATION.  
YOU RUN A TIGHT SHIP.

NEVERTHELESS, IN ~~F~~<sup>ANY</sup> WORKFORCE, ~~IS~~ LARGE AND ~~AS~~ DIVERSE AS ~~THE~~ <sup>THIS,</sup>  
~~FEDERAL WORKFORCE,~~ THE STATISTICAL POSSIBILITIES ARE SUCH THAT  
YOU EITHER DO HAVE NOW -- OR YOU VERY SOON WILL HAVE --  
INDIVIDUALS AMONG YOU WHO ARE SEROPOSITIVE AND POSSIBLY ALSO  
SHOWING THE FIRST CLINICAL SIGNS OF AIDS.

AND I'M ASKING THAT YOUR RESPONSE TO SUCH INDIVIDUALS BE  
THE SAME RESPONSE THAT WE DEMAND OF EVERY OTHER AMERICAN.

YOUR RESPONSE MUST BE COMPASSIONATE AND IT MUST BE  
CONSISTENT WITH THE LAW OF THE LAND, AS THE SUPREME COURT, THE  
PRESIDENT, AND THE ATTORNEY GENERAL HAVE SPELLED IT OUT.

OF COURSE, I'M USED TO TALKING IN THIS MANNER. AS A PHYSICIAN AND AS YOUR SURGEON GENERAL, I'M PART OF A TRADITION OF CARE THAT WILL NOT ABANDON THE SICK AND THE DISABLED, WHOEVER THEY ARE AND WHATEVER THEY MAY HAVE DONE TO HAVE ENDED UP IN SUCH A FIX.

THAT'S THE TRADITION OF MEDICINE. BUT IT ALSO HAPPENS TO BE A FUNDAMENTAL TRADITION OF OUR COUNTRY. AND THIS IS WHERE YOU AND I MUST TAKE THE SAME POSITION.



AS AMERICANS, WE HAVE EVERY REASON TO BE PROUD OF THE WAY WE'VE SUCCESSFULLY FACED THE CHALLENGE OF FAIRNESS AND HAVE GUARANTEED EQUAL ACCESS TO ALL HEALTH AND SOCIAL SERVICES TO EVERY ONE OF OUR CITIZENS, REGARDLESS OF RACE, COLOR, CREED, AGE, SEX, NATIONAL ORIGIN ... OR DEGREE OF ABILITY OR OF DISABILITY.

IT HASN'T BEEN AN EASY TRADITION AND WE HAVEN'T BEEN PERFECT AT IT EITHER. BUT OUR RECORD IS STILL VERY GOOD ... IN FACT, IT REMAINS THE MODEL FOR THE REST OF THE WORLD.

AND IT'S A RECORD TO BUILD ON ... NOT A RECORD TO IGNORE.

SO THE QUESTION BEFORE US IS SIMPLY THIS:

\* WILL WE LET THE DISEASE OF AIDS -- ALL BY ITSELF --  
REVERSE THIS SPECIAL AMERICAN CONTRIBUTION TO HUMAN HISTORY?

WILL THIS DISEASE -- BY ITSELF -- AGAIN RAISE ARTIFICIAL  
BARRIERS BETWEEN OUR CITIZENS ... BARRIERS THAT TOOK SO MUCH  
WORK AND COURAGE TO TEAR DOWN?

WE HOPE AND PRAY THAT THIS WILL NOT HAPPEN.

BUT HOPES AND PRAYERS MAY NOT BE ENOUGH. WE NEED TO REINFORCE THOSE HOPES AND PRAYERS WITH COURAGE AND COMPASSION AT EVERY LEVEL OF GOVERNMENT ... IN EVERY OFFICE AND MEETING-ROOM ... AND AT EVERY WORK STATION.

WE WILL NEED TO FIGHT THIS DISEASE WITH GOOD SCIENCE ... AND WITH GOOD SENSE. IN THAT WAY, WE MAY YET GIVE THE WORLD SOMETHING EVERY BIT AS PRECIOUS AS THE MUCH-DESIRED AIDS VACCINE:

WE COULD GIVE THE WORLD A GENUINE DEMONSTRATION OF THE POWER  
OF COMPASSION AND JUSTICE IN THE BATTLE AGAINST THIS DREAD  
DISEASE OF AIDS.

THAT'S MY HOPE. MAYBE IT CAN BE YOURS AS WELL.

ONCE AGAIN...THANK YOU.

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