

ORIGINAL

* 3 LEADERS

REMARKS

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

I'M DELIGHTED TO JOIN YOU THIS MORNING TO TALK ABOUT THE U.S. PUBLIC HEALTH SERVICE AND MY JOB AS ITS SURGEON GENERAL. THEY ARE MY FAVORITE TOPICS.

I PROBABLY WOULDN'T HAVE SAID THAT 10 YEARS AGO. LIKE MOST AMERICANS, I'M SURE I HAD HEARD OF THE PUBLIC HEALTH SERVICE IN SOME CONTEXT OR OTHER, BUT I TOOK FOR GRANTED THE FACT THAT -- WHATEVER THE PUBLIC HEALTH SERVICE WAS -- IT WAS MOST LIKELY WORKING ON MY BEHALF AND I NEEDN'T GIVE IT ANOTHER THOUGHT.

BUT ONCE I BECAME SURGEON GENERAL I BEGAN TO LEARN QUITE A BIT ABOUT BOTH THE HISTORY AND THE WORK OF THE PUBLIC HEALTH SERVICE.

I WAS IMPRESSED. AND I'M STILL IMPRESSED. AND BY THE TIME I'M THROUGH WITH MY REMARKS, I HOPE YOU'LL BE IMPRESSED, TOO.

LET ME BEGIN BY GIVING YOU A LITTLE SNAPSHOT OF THE ORGANIZATION AS IT IS NOW. I'LL TELL YOU A LITTLE ABOUT ITS MISSION ... TOUCH ON ITS PAST ... AND OFFER AN EDUCATED GUESS ABOUT ITS FUTURE.

FIRST, HOW BIG IS THE P.H.S.? WE ARE 40,000 STRONG. OF THAT NUMBER, ABOUT 34,000 ARE CIVILIAN CIVIL SERVANTS. THE REMAINING 6,000 MEN AND WOMEN ARE IN THE UNIFORMED COMMISSIONED OFFICERS CORPS. THEY ARE ALL PROFESSIONAL PEOPLE: DOCTORS, NURSES, PHARMACISTS, DENTISTS, ENGINEERS, AND SO FORTH.

I AM ONE OF THAT GROUP OF 6,000, ONE OF THE PEOPLE IN UNIFORM ... ONLY MORE SO. AS SURGEON GENERAL, I AM THE HIGHEST-RANKING ACTIVE DUTY OFFICER IN THE UNIFORMED COMMISSIONED CORPS OF THE U.S. PUBLIC HEALTH SERVICE.

ACTUALLY, THE P.H.S. BEGAN AS A QUASI-MILITARY SERVICE BACK IN 1798. ON JULY 16 OF THAT YEAR PRESIDENT JOHN ADAMS SIGNED THE LAW THAT CREATED THE "MARINE HOSPITAL SERVICE." ITS PERSONNEL TOOK CARE OF SICK MERCHANT MARINE SAILORS WHO CAME INTO SUCH PORTS AS BOSTON, NEW YORK, BALTIMORE, AND CHARLESTON, SOUTH CAROLINA.

SO, IF I LOOK LIKE AN ADMIRAL IN THIS UNIFORM ... IT'S BECAUSE I AM. MY TITLE MAY BE "SURGEON GENERAL," BUT TECHNICALLY I HOLD THE NAVAL RANK OF VICE-ADMIRAL.

AND THAT, OF COURSE, IS A HOLD-OVER FROM THOSE DAYS -- 190 YEARS AGO -- WHEN WE WERE A MARINE SERVICE PROVIDING HEALTH AND MEDICAL CARE FOR SAILORS COMING INTO AMERICAN PORTS.

BACK IN THOSE DAYS LIFE WAS A LOT SIMPLER, AND WE COULD BE A SINGLE ORGANIZATION. BUT A LOT HAS HAPPENED SINCE 1798. TODAY THE "U.S. PUBLIC HEALTH SERVICE" IS NOT SO MUCH A SINGLE ORGANIZATION AS IT IS A KIND OF "FEDERATION" OF 7 HIGHLY INDIVIDUAL PUBLIC HEALTH AGENCIES, EACH WITH ITS OWN SPECIAL EXPERTISE, SPHERE OF INFLUENCE, AND RECORD OF ACHIEVEMENT ON BEHALF OF THE AMERICAN PEOPLE.

THIS IS WHO WE ARE. BUT WHAT DO WE DO?

I WON'T GO INTO A LONG LIST AT THIS TIME, BUT I WILL TOUCH
ON A FEW SPECIAL ASSIGNMENTS:

* AS A UNIFORMED SERVICE, WE ARE AVAILABLE FOR SPECIAL
HEALTH ASSIGNMENTS ANYWHERE IN THE WORLD, WHEREVER THERE'S A
PUBLIC HEALTH EMERGENCY AND WE'RE ASKED TO COME IN AND HELP.
FOR EXAMPLE, HERE IN THE U.S. ...

WE STAFF THE HOSPITALS AND CLINICS OF THE INDIAN HEALTH
SERVICE ...

WE PROVIDE CONTRACT HEALTH CARE FOR THE U.S. COAST
GUARD AND THE FEDERAL PRISON SYSTEM ...

OUR MEDICAL OFFICERS WERE FIRST ON THE SCENE AT THE
LOVE CANAL, TIMES BEACH, AND THREE-MILE ISLAND ...

AND WE PROVIDE PRIMARY HEALTH CARE FOR THOUSANDS OF
FAMILIES IN MIGRANT LABOR CAMPS, IN COAL MINING
COUNTRY, AND IN RURAL AND INNER CITY GHETTOS.

WE ALSO SERVE OUTSIDE THE BORDERS OF THE UNITED STATES, ON
REQUEST. FOR EXAMPLE ...

WE'VE BEEN IN THE MIDDLE EAST AND CENTRAL AMERICA ... WE'VE BEEN IN SUB-SAHARA AFRICA AND BHOPAL, INDIA... WE'VE BEEN IN ETHIOPIA, SPAIN, AND SOUTHEAST ASIA ... WE'VE SCREENED REFUGEES ON THE WAY TO THIS COUNTRY ... AND WE PLAYED A LEADING ROLE IN THE SUCCESSFUL CAMPAIGN TO RID THE HUMAN RACE OF SMALLPOX.

AND RIGHT NOW, COMMISSIONED OFFICERS OF THE U.S. PUBLIC HEALTH SERVICE -- BOTH HERE IN THE U.S.A. AND IN COUNTRIES AROUND THE WORLD -- ARE AMONG THOSE MAKING MAJOR CONTRIBUTIONS TO THE WORLD'S UNDERSTANDING OF AIDS.

THESE SCRAPS OF INFORMATION MAY SOUND A BIT RANDOM, BUT ACTUALLY THEY ARE ALL PART OF THE OVERALL MISSION OF ONE OR ANOTHER OF THE 7 P.H.S. AGENCIES. LET ME BRIEFLY RUN THROUGH THEM FOR YOU NOW.

I'LL TAKE THEM ALPHABETICALLY, BEGINNING WITH THE ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION.

I THINK THE TITLE TELLS THE STORY. THIS AGENCY HAS THREE INSTITUTES -- OF MENTAL HEALTH, OF DRUG ABUSE, AND OF ALCOHOLISM AND ALCOHOL ABUSE. THE COMBINED A.D.A.M.H.A. BUDGET FOR THE CURRENT FISCAL YEAR IS \$1.3 BILLION, WITH HALF GOING FOR RESEARCH AND PUBLIC EDUCATION AND THE OTHER HALF GOING TO THE STATES IN THE FORM OF "BLOCK GRANTS" TO SUPPORT COMMUNITY MENTAL HEALTH CLINICS AND DRUG ABUSE AND ALCOHOLISM TREATMENT CENTERS.

NEXT ARE THE CENTERS FOR DISEASE CONTROL, OR C.D.C. C.D.C. IS HEADQUARTERED IN ATLANTA, GEORGIA.

AS THE NAME IMPLIES, C.D.C.'S PRIMARY MISSION IS TO CONTROL OR PREVENT COMMUNICABLE OR VECTOR-BORNE DISEASES -- MEASLES, MUMPS, SYPHILIS, AND T.B. -- AND ALSO DO RESEARCH ON A RANGE OF CHRONIC, ENVIRONMENTAL, AND OCCUPATIONAL DISEASES, SUCH AS DIABETES, BIRTH DEFECTS, WORKPLACE INJURIES, MALNUTRITION, AND SO ON.

THE OFFICE ON SMOKING AND HEALTH, WHICH PRODUCES THE SURGEON GENERAL'S ANNUAL REPORT ON SMOKING, IS ALSO PART OF C.D.C.

THIS YEAR C.D.C WILL SPEND ABOUT A BILLION DOLLARS. NEARLY HALF THAT MONEY WILL BE SPENT ON THE FIGHT AGAINST AIDS. FOR EXAMPLE, THE AIDS BROCHURE WE MAILED TO EVERY HOME IN AMERICA WAS A SPECIAL C.D.C. PROJECT.

ANOTHER P.H.S. AGENCY IS THE FOOD AND DRUG ADMINISTRATION -- OR THE F.D.A., ONE OF THE MOST WIDELY PUBLICIZED, DEEPLY RESPECTED, AND ROUNDLY HATED AGENCIES OF THE FEDERAL GOVERNMENT.

UNDER THE TWO WATCHWORDS OF ITS LAW -- SAFETY AND EFFECTIVENESS -- THE F.D.A. IS THE PUBLIC HEALTH ARBITER OF HUMAN AND VETERINARY DRUGS, VACCINES, MEDICAL DEVICES, PROCESSED FOODS AND FOOD SUPPLEMENTS, HEALTH SUPPLIES, AND RADIOLOGICAL GEAR IN THE AMERICAN MARKEPLACE.

THE F.D.A.'s BUDGET IS UNDER A HALF-BILLION DOLLARS A YEAR, BUT ITS ACTIONS AFFECT A HALF TRILLION DOLLARS WORTH OF GOODS AND SERVICES IN INTERSTATE COMMERCE.

NEXT IS THE HEALTH RESOURCES AND SERVICES ADMINISTRATION, OR "HRSA."

"HRSA" CARRIES ON A DOZEN OR SO PUBLIC HEALTH PROGRAMS PRIMARILY FOR PROGRAM FOR UNDERSERVED AND DISADVANTAGED POPULATIONS, FROM THE HALF-BILLION-DOLLAR MATERNAL AND CHILD HEALTH PROGRAM TO THE SMALL 3-MILLION-DOLLAR PROGRAM TO SUPPORT BLACK LUNG CLINICS.

"HRSA" ALSO PROVIDES GRANTS AND LOANS TO STRENGTHEN CERTAIN CRITICAL HEALTH PROFESSIONS, SUCH AS FAMILY MEDICINE, GERIATRIC HEALTH CARE, AND PROFESSIONAL NURSING. MAYBE SOME OF YOU WILL CHOOSE ONE OF THESE CAREERS LATER ON AND WILL QUALIFY FOR THIS KIND OF HELP.

"HRSA" IS ALSO THE HOME BASE FOR THE NATIONAL HEALTH SERVICE CORPS, WHICH PLACES DOCTORS, NURSES, AND OTHER HEALTH PROFESSIONALS IN AREAS WHERE THERE IS VERY LITTLE HEALTH SERVICE ... OR NO SUCH SERVICE AT ALL.

THE NEWEST FREE-STANDING AGENCY IN THE P.H.S. "FEDERATION"
IS THE INDIAN HEALTH SERVICE, OR THE I.H.S.

THE I.H.S. PROVIDES A BILLION DOLLARS' WORTH OF HEALTH CARE
TO OVER A MILLION NATIVE AMERICANS AND ALASKAN NATIVES THROUGH A
COMBINED DELIVERY SYSTEM OF LITERALLY HUNDREDS OF HOSPITALS,
HEALTH CENTERS, SMALL HEALTH STATIONS, SATELLITE CLINICS, URBAN
HEALTH PROJECTS, AND SCHOOL HEALTH CENTERS.

I AM PLEASED TO SAY THAT THE I.H.S. FACILITIES WERE THE
FIRST FEDERAL FACILITIES TO BAN SMOKING.

THE I.H.S. SYSTEM IS ACTUALLY A COMBINATION OF DIRECT HEALTH CARE DELIVERED BY I.H.S. PERSONNEL -- THAT IS, OUR OWN DOCTORS, NURSES, PHARMACISTS, DENTISTS, SANITARIANS, AND SO ON -- PLUS A HEALTH CARE SYSTEM RUN BY THE INDIAN TRIBES THEMSELVES UNDER I.H.S. CONTRACTS, PLUS A NETWORK OF NON-TRIBAL CONTRACT HEALTH SERVICES.

THE 6TH P.H.S. AGENCY -- AND THE ONE WITH THE MOST MONEY TO SPEND, OVER \$6 BILLION THIS YEAR -- IS THE NATIONAL INSTITUTES OF HEALTH.

N.I.H. JUST CELEBRATED ITS ONE-HUNDREDTH BIRTHDAY. DURING ITS FIRST CENTURY, THE NATIONAL INSTITUTES HAVE SUPPORTED HUNDREDS OF THOUSANDS OF RESEARCHERS, INCLUDING 90 NOBEL PRIZE-WINNERS IN MEDICINE AND CHEMISTRY.

N.I.H. SUPPORT HAS ALSO MADE POSSIBLE SOME OF THE MOST IMPORTANT DEVELOPMENTS IN HUMAN MEDICINE, SUCH AS ...

- * THE DISCOVERY OF THE MEANING OF THE GENETIC CODE, HUMANITY'S BLUEPRINT, SO TO SPEAK ...

- * ALSO, THE DEVELOPMENT OF CANCER CHEMOTHERAPY AND CURES FOR CHILDHOOD LEUKEMIA AND HODGKIN'S DISEASE.

- * AND THE DISCOVERY, UP ON THE 13TH FLOOR OF THE N.I.H. CLINICAL CENTER, OF THE DRUG A.Z.T., THE ONLY DRUG WE HAVE THAT SLOWS DOWN THE PROGRESS OF AIDS.

- * AND I SHOULD ALSO MENTION THE NATIONAL HIGH-BLOOD PRESSURE EDUCATION PROGRAM, WHICH -- I BELIEVE -- IS LARGELY RESPONSIBLE FOR THE 40 PERCENT DECLINE IN DEATHS FROM STROKE OVER THE PAST 15 YEARS OR SO.

ONCE YOU START TALKING ABOUT N.I.H., IT'S DIFFICULT TO STOP BECAUSE THERE'S SO MUCH TO SAY ABOUT IT. BUT I WILL AND I'LL NOW MOVE ON TO THE 7TH AND FINAL ORGANIZATION WITHIN THE U.S. PUBLIC HEALTH SERVICE: THE OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH, OR "OASH."

ORDINARILY, THE TOP ADMINISTRATIVE OFFICES IN GOVERNMENT ARE JUST THAT -- ADMINISTRATIVE, WITH VERY LITTLE PROGRAM RESPONSIBILITY. BUT THE PUBLIC HEALTH SERVICE HAS SEVERAL PROGRAM ACTIVITIES THAT CUT ACROSS THE WORK OF MANY OTHER P.H.S. AGENCIES. THESE PARTICULAR ACTIVITIES ARE ADMINISTERED OUT OF THE ASSISTANT SECRETARY'S OFFICE.

THE GOVERNMENT'S BILLION-DOLLAR BATTLE AGAINST AIDS IS ONE SUCH PROGRAM THAT IS CENTRALLY COORDINATED WITHIN "OASH." THIS CENTRAL COORDINATION PREVENTS RESEARCH DUPLICATION, MIX-UPS IN POLICY, AND ANY BUREAUCRATIC DELAYS ON DECISIONS OF ONE KIND OR ANOTHER.

OTHER, SIMILAR "OASH" PROGRAMS THAT INVOLVE SEVERAL P.H.S. AGENCIES INCLUDE HEALTH PROMOTION AND DISEASE PREVENTION, FAMILY PLANNING, ADOLESCENT FAMILY LIFE, PHYSICAL FITNESS, HEALTH SERVICES RESEARCH, AND SUPPORT FOR THE IMPROVEMENT OF THE HEALTH OF AMERICA'S MINORITY CITIZENS.

THE PERSON NOMINALLY IN CHARGE OF THE DAY-TO-DAY ACTIVITIES OF THE U.S. PUBLIC HEALTH SERVICE IS THE ASSISTANT SECRETARY FOR HEALTH, OR THE "ASH." THIS INDIVIDUAL IS A POLITICAL OFFICER OF THE ADMINISTRATION AND SERVES AT THE PLEASURE OF THE PRESIDENT. ALSO, WHEN THE PRESIDENT GOES, THIS PERSON GOES, TOO.

THEN, WHERE DOES THE SURGEON GENERAL FIT IN?

I WAS APPOINTED AND RE-APPOINTED BY PRESIDENT REAGAN TO TWO FIXED FOUR-YEAR TERMS. MY SECOND TERM WILL END IN NOVEMBER 1989, ABOUT 10 MONTHS INTO THE NEXT ADMINISTRATION.

WITH DAY-TO-DAY MANAGEMENT CHORES BEING DONE BY OTHER PEOPLE, THE SURGEON GENERAL IS MORE LIKELY TO BE SPENDING HIS TIME INFORMING AND EDUCATING THE HEALTH PROFESSIONS -- AND THE GENERAL PUBLIC -- ABOUT THE KEY ISSUES AFFECTING THE HEALTH OF ALL AMERICANS. IN FACT, PUBLIC EDUCATION IS THE MOST IMPORTANT ASSIGNMENT I HAVE.

THE RECENT HOUSE-TO-HOUSE MAILING OF THE AIDS PAMPHLET IS A GOOD EXAMPLE OF THIS ROLE ... AND MY APPEARANCE BEFORE YOU THIS MORNING IS ANOTHER.

THUS FAR, DURING MY TERM OF OFFICE -- WHICH BEGAN ALMOST 7 YEARS AGO IN NOVEMBER OF 1981 -- I'VE BEEN THE LEAD PUBLIC SPOKESPERSON ON THE FOLLOWING ISSUES:

* SMOKING. THIS WAS AN ISSUE WAITING FOR ME WHEN I FIRST CAME TO WASHINGTON IN 1981. THE SURGEON GENERAL -- BY LAW -- REPORTS TO THE CONGRESS AND THE NATION EACH YEAR ON THE RELATIONSHIP BETWEEN SMOKING AND HEALTH. IF NEED BE, HE OR SHE ALSO MAKES RECOMMENDATIONS AS TO WHAT THE COUNTRY OUGHT TO DO NEXT.

TWO MONTHS AGO I RELEASED MY 7TH ANNUAL REPORT ON SMOKING AND HEALTH. I BELIEVE IT'S THE MOST IMPORTANT ONE SO FAR.

THE REPORT LAID OUT ALL THE EVIDENCE SHOWING THAT THE NICOTINE IN TOBACCO IS, TECHNICALLY AND SCIENTIFICALLY, AN ADDICTING DRUG IN THE SAME SENSE THAT HEROIN AND COCAINE ARE ADDICTING DRUGS.

AND THAT ADDICTING DRUG -- NICOTINE -- IS THE KEY REASON THAT ABOUT 50 MILLION AMERICANS STILL SMOKE AND 300,000 OF THEM DIE PREMATURELY EACH YEAR OF LUNG CANCER, HEART DISEASE, OR STROKE.

FOUR YEARS AGO I CALLED UPON ALL AMERICANS TO MAKE THIS COUNTRY A "SMOKE-FREE SOCIETY BY THE YEAR 2000." THE RESPONSE HAS BEEN TERRIFIC -- ESPECIALLY AMONG YOUNG PEOPLE, WHO ARE THE SPECIAL TARGETS OF THE INTERNATIONAL CIGARETTE COMPANIES. FEWER AND FEWER PEOPLE ARE STARTING TO SMOKE AND MORE AND MORE SMOKERS ARE QUITTING THE HABIT. IT'S NOT EASY, BUT THEY'RE DOING IT.

SO WE JUST MIGHT REACH THAT GOAL OF BECOMING "SMOKE-FREE" IN A DOZEN YEARS. I CERTAINLY HOPE SO.

* ANOTHER ISSUE INVOLVES THE HANDICAPPED ... ESPECIALLY HANDICAPPED CHILDREN. I'VE BEEN THE FRONT-LINE PUBLIC HEALTH SPOKESPERSON TO GET BETTER PROTECTION FOR DISABLED INFANTS.

THIS WAS AN ISSUE TRIGGERED BY THE BIRTH IN APRIL 1982 OF "BABY DOE," A MALE INFANT BORN WITH CERTAIN MENTAL AND PHYSICAL DISABILITIES ... NOTHING CATASTROPHIC ... BUT HIS PARENTS GAVE INSTRUCTIONS ANYWAY TO LET "BABY DOE" DIE. AND HE DID, A WEEK AFTER HE WAS BORN.

I FELT THAT WAS WRONG AND I WORKED HARD TO MAKE SURE NO OTHER BABY WAS EVER TREATED THAT WAY AGAIN. AND WE NOW HAVE A LAW TO PREVENT SUCH TRAGEDIES.

* I'VE ALSO BEEN A PUBLIC HEALTH ADVOCATE ON BEHALF OF ANOTHER POPULATION GROUP THAT IS ALSO VERY VULNERABLE: THE ELDERLY. FRANKLY, I THINK EACH ONE OF YOU MUST RECOGNIZE THAT, AT YOUR TIME OF LIFE, YOU COULD SOON BE FACED NOT ONLY WITH A "BABY DOE" SITUATION -- THAT IS, HAVING A NEWBORN INFANT WHO IS LESS THAN "PERFECT" -- BUT ALSO A "GRANNY DOE" SITUATION, IN WHICH A PARENT OR GRANDPARENT BECOMES VERY ILL AND IS TOTALLY DEPENDENT ON OTHERS, YET HE OR SHE REMAINS VERY MUCH ALIVE.

HOW WILL YOU HANDLE THOSE KINDS OF SITUATIONS, IF THEY SHOULD ARISE?

* AND FOR THE PAST TWO YEARS I'VE BEEN DEEPLY INVOLVED IN TELLING THE AMERICAN PEOPLE THE FACTS ABOUT AIDS.

THIS HAS BEEN THE TOUGHEST ASSIGNMENT OF ALL, SINCE IT INVOLVES HUMAN SEXUALITY -- SOMETHING THE GOVERNMENT STAYS CLEAR OF AS MUCH AS POSSIBLE -- AND ILLICIT DRUG USE -- SOMETHING THE GOVERNMENT HAS BEEN INVOLVED IN ... BUT WITH LIMITED SUCCESS.

OUR MOST RECENT EFFORT TO INFORM THE PUBLIC ABOUT THE THREAT OF AIDS -- AND WHAT EACH PERSON CAN DO ABOUT IT -- WAS THE PAMPHLET WE SENT TO EVERY HOME IN AMERICA. BASICALLY, HERE'S THE MESSAGE OF THAT PAMPHLET:

"IF YOU'RE BEING CAREFUL AND SENSIBLE ABOUT YOUR PERSONAL RELATIONSHIPS AND YOUR OWN SEXUALITY, GOOD ... DON'T CHANGE. BUT IF YOU'RE NOT BEING CAREFUL AND SENSIBLE, THEN YOU'D BETTER CHANGE YOUR WAYS, OR YOU RUN THE RISK OF CONTRACTING THE AIDS VIRUS AND DYING A LONG AND PAINFUL DEATH."

IT'S A GRIM MESSAGE ... BUT I HOPE IT IS READ, UNDERSTOOD, AND TAKEN TO HEART BY EVERY AMERICAN.

FOR THE PAST FEW MINUTES, I'VE TOLD YOU WHO WE ARE AND WHAT WE DO IN THE U.S. PUBLIC HEALTH SERVICE. NOW, I'LL CLOSE WITH A BRIEF REMARK ABOUT OUR FUTURE AND THEN TAKE SOME OF YOUR QUESTIONS.

THE P.H.S. IN GENERAL SEEMS TO BE EVOLVING INTO AN ORGANIZATION WITH THREE MAIN PARTS TO ITS MISSION:

- * FIRST, RESEARCH ... WE'RE THE COUNTRY'S PRIMARY INSTRUMENT FOR CARRYING OUT LONG-TERM, RESOURCE-INTENSIVE, BIOMEDICAL AND BEHAVIORAL RESEARCH. AND I BELIEVE WE'LL CONTINUE TO PLAY THAT ROLE. IF ANY OF YOU GO ON TO CAREERS IN LIFE SCIENCES RESEARCH, PLEASE KEEP US IN MIND AS A PLACE THAT WANTS TO HELP.

- * THE SECOND ASPECT OF OUR MISSION IS TO PREVENT DISEASE AND PROMOTE HEALTH ... WE'RE HELPING TO SHIFT THE EMPHASIS OF AMERICAN MEDICINE FROM CURING ILLNESS TO PREVENTING ILLNESS. WE'RE GOING AFTER THE MAJOR BEHAVIORAL CAUSES OF SICKNESS AND DEATH, CAUSES SUCH AS SMOKING, ALCOHOLISM, POOR DIET, AND RECKLESS BEHAVIOR ON THE HIGHWAY. IF THOSE BEHAVIORS DISAPPEARED FROM SOCIETY, AT LEAST HALF OF ALL OUR ILLNESS AND DISABILITY WOULD DISAPPEAR, ALSO.

THINK ABOUT IT ... AND JUMP ON THE PREVENTION BAND-WAGON FOR A LONG AND HEALTHFUL LIFE.

* AND THE THIRD PART OF OUR MISSION IS TO CONTINUE TO PROVIDE HEALTH SERVICES TO OUR NEEDIEST CITIZENS ... PEOPLE WHO ARE -- FOR WHATEVER REASON -- OUTSIDE THE MAINSTREAM OF HEALTH AND MEDICAL CARE: INDIANS AND ALASKAN NATIVES, MIGRANT WORKERS, THE HOMELESS, AIDS VICTIMS, FEDERAL PRISONERS, AND SO ON. HERE, AGAIN, IF YOU'RE HEADING INTO THE HEALTH PROFESSIONS, STAY IN TOUCH WITH US. WE NEED YOU. THE COUNTRY NEEDS YOU.

THAT'S ABOUT ENOUGH BACKGROUND. I HOPE YOU'VE LEARNED
SOMETHING NEW DURING OUR TIME TOGETHER. AND NOW, I'LL BE HAPPY
TO TAKE A FEW QUESTIONS.

THANK YOU.

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