HEALTH POLICY WORKING GROUP BRIEFING

THE SURGEON GENERAL'S REPORT ON AIDS

PRESENTED BY C. EVERETT KOOP, M.D., Sc.D.

SEPTEMBER 24, 1986

- Thank White House Staff and President for opportunity to alert, inform, and educate the American people on the AIDS epidemic

- Explain role, tradition, and credibility of Surgeon General in bringing health message to the country
  - Public opinion polls
  - Surgeon General associated with correct advice (e.g. polio vaccine, non-smoking)

- Handing out numbered draft copies of report to be returned at the end of the briefing

- Still under revision, would not like misinformation to get out

- Have consulted with best medical and scientific experts

- Have consulted with major interest groups in health, education, and other aspects of society. Range of organizations from Roman Catholic Cardinals to Association of Black Gays and Lesbians (Hand Out)

- My report must deal with homosexuality, promiscuity, and prostitution. The report is not judgmental, but provides the education and information necessary to change individual behavior.

- Found enormous amount of consensus on the need to stop the epidemic of this fatal disease (e.g. church groups agree that there must be sex education to save the lives of countless young people

- Opportunity to teach values to our young people with regard to sex and drug abuse

- Control of AIDS is an integral part of the President's Initiative to rid this nation of the curse of drug abuse and addiction

- Today I would like to highlight the Surgeon General's Report on AIDS for you.

- Although first reported in U.S., AIDS is not an American disease. It is an international problem that will require cooperation and coordination with other countries. My report is directed at the U.S. but could be applied elsewhere.
AIDS kills. There is no vaccine, no proven therapy. It strikes young productive Americans. Our only defense is health education and prevention.

We know a lot about AIDS in a short time. The research community is mounting a tremendous effort.

Much has been written and distributed, but there are major gaps in most people's understanding.

It is a difficult issue, it deals with sex, drugs, and young people. It is an issue within these larger issues that we have major difficulty in addressing.

Why must we deal with this issue? By the end of 1991, an estimated 270,000 cases will have occurred since 1981 with a resulting 179,000 deaths. In 1991 an estimated 140,000 patients with AIDS will require $8 - $16 billion in services. We must not allow that to happen.

What is AIDS? Acquired Immune Deficiency Syndrome is the final stage of a series of health problems caused by the AIDS virus.

The AIDS virus enters the blood stream usually by infection through sexual contact or by shared IV drug equipment from an infected person.

Once blood stream infected:

- Person will test positive for AIDS antibodies
- Some persons remain well, can infect others
- Some persons progress to ARC
- Some persons progress to classic AIDS

All infected persons can spread the virus if they don't take proper precautions.

AIDS destroys the body's immune system allowing secondary infection of: *Pneumocystis carinii* pneumonia, Kaposi's sarcoma (cancer).

Symptoms may not show up for several years.

Current situation

- Estimated 1.5 million Americans infected with the virus
- 100,000 - 200,000 will come down with ARC
- 300,000 - 450,000 will come down with AIDS
- cases to date - 25,000
- deaths to date - over half

Most persons with AIDS or ARC are homosexual males and male and female intravenous drug users. Number of heterosexual victims will increase, but majority of cases will continue to be among current high risk group.
No risk of non-sexual infection from everyday life (e.g. study of hemophilia families) - shared toothbrushes, cups, kissed each other

Almost no risk for health workers - 750 exposed, only three positive tests as result of infected needle stick.

To date AIDS cases have been primarily in gay and bisexual men and IV drug users.

In future more heterosexual spread like any sexually transmitted disease

Risk factors
- Sex between men
- Multiple partners

How transmitted?
- Sexual contact from infected blood or semen and possibly vaginal fluids
- Rectum, vagina, penis
- Small tears (not visible to naked eye)

Couples in mutually faithful monogamous relationships are protected from AIDS through sexual transmission (faithful for last five years) - Know partner!

Prevention - protect yourself from AIDS infection
- Blood test if you or your partner are unsure
- Use of condoms
- Avoid sexual activities that cause tears in linings of rectum, vagina, or penis (e.g. anal intercourse)
- No IV drugs or sterile needles, syringes and related equipment
- Avoid use of prostitutes

Intravenous drug users make up about 25% of AIDS cases in U.S.
- Infection transmitted by blood contaminated by AIDS virus left in needle, syringe, or drug related implements and shared with another person.
- Prevention - Don't use illicit intravenous drugs
- For those who cannot "change behavior", use clean previously unused needle, syringe and related equipment

Blood transfusion
- Donors screened (those involved in homosexual behavior or who have used intravenous street drugs should never donate blood.
- Blood tested
- Blood supply safe (less than 1 in 100,000 transfusions)
Hemophilia - 90% infected before blood clotting factor made safe. Group represents less than 1% of cases of AIDS.

Infected mothers can pass AIDS to unborn children (about 1/3). Most of those infected will develop AIDS and die. Most of these babies born to mothers who are IV drug users. Women involved in high risk behavior (or partners) should avoid pregnancy.

Safe practices
- Casual social contact, not casual sex
- Donating blood
- Health services
- Visiting or caring for AIDS patients
- Children with AIDS attending school

Insects - no known cases (transmission)
Pets - no known cases (transmission)
Tears and saliva - no known cases (transmission)
Children in School - No known cases (transmission)

AIDS is spread by sexual contact and sharing IV drug equipment with infected persons

Summary - Americans and their sex partners who do not engage in high risk sexual behavior and IV drug use are safe.

Those who do place themselves and their sexual contacts and unborn children at risk for their lives.

To avoid getting AIDS and to control the AIDS epidemic
- avoid promiscuous sexual practices
- maintain mutually faithful monogamous sexual practices
- avoid injecting illicit drugs

Look to the future
- profound changes in society (e.g. end of sexual revolution)

No vaccine, no cure - must aggressively promote health education with strong preventive message. The only real hope over next 5-10 years.

Must provide information about AIDS through sex and drug education programs through elementary and secondary schools (Save our children)

Must reach the general population as well as:
- rural areas with low incidence to date
- Black and Hispanic populations
If we can educate people to adopt preventive behavior, we can save 12,000 – 14,000 people in 1991 from death by AIDS.

We must plan for the heavy strain on our health care delivery system, (including mental health). Promote state and local task forces

- Insure confidentiality

- Must deal with controversial issues
  - No compulsory blood testing of individuals
  - No quarantine

- No identification of AIDS carriers by some visible sign

- Must continually hammer away at the prevention message and maintain credibility with the American people by continuous updating of the AIDS message

- Most of all, we do not want to look back and say we “could have” stopped AIDS in the 1980's and didn't do it.

Thank You