

Washington DC 20201

May 9, 1984

Dear Colleague:

You have no doubt read of the exciting developments with respect to Acquired Immune Deficiency Syndrome: isolation in AIDS patients of a cytopathic retrovirus variant of the Human T-cell Leukemic Virus (HTLV-III). Enclosed is a copy of the Secretary's statement at the April 23rd press conference announcing this development, as well as the Science papers containing the reports.

Sincerely,

GRO-C

J. M. McGinnis, M.D.

Deputy Assistant Secretary for Health Director, Office of Disease Prevention and Health Promotion

Enclosures

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STATEMENT BY SECRETARY HECKLER April 23, 1984

On June 14th of last year -- about ten months ago -- I traveled to Denver to tell the United States Conference of Mayors that I had made the conquest of AIDS the federal government's number-one health priority.

I told the Mayors and the American people that this awesome medical problem was "a disease with two names." One was "AIDS," Acquired Immune Deficiency Syndrome. The other was "Fear."

In the intervening months, public education and public understanding have substantially reduced the incidence of <u>fear</u>. The panic which, for a time, began to spread through American cities has quieted.

Today I am proud to announce that the <u>arrow</u> of funds, medical personnel, research and experimentation which the Department of Health and Human Services and its allies around the world have aimed and fired at the disease AIDS has hit the target.

Only two or three rings away from the bulls-eye.

Here are the specifics:

First -- the probable cause of AIDS has been found -- a variant of a known human cancer virus, called HTLV-III.

Second -- not only has the agent been identified, but a new process has been developed to mass produce this virus. This discovery is equally crucial because it enables us, for the first time, to characterize the agent in detail and to understand its behavior.

Third -- With discovery of both the virus and this new process, we now have a blood test for AIDS which we hope can be widely available within about six months. We have applied for the patent on this process today.

With the blood test, we can now identify AIDS victims with essentially 100 percent certainty. Thus, we should be able to ensure that blood for transfusion is free from AIDS. We should be able to prevent transfusion-related AIDS cases, as well as those which might appear in hemophiliacs.

We will also be able to promptly and easily diagnose people who may have been infected by the virus, and perhaps develop ways to prevent the full syndrome from occurring.

Finally -- we also believe that the new process will enable us to develop a vaccine to prevent AIDS. We hope to have such a vaccine ready for testing in about two years.