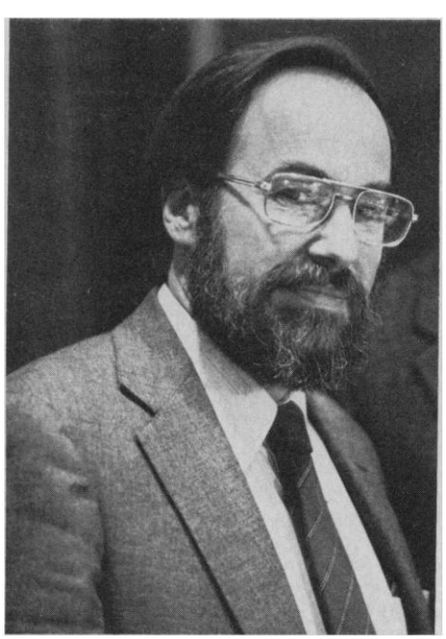
$2-Billion Program Urged for AIDS

National efforts to combat AIDS need better coordination and management; more resources should be devoted to public education, Institute of Medicine reports

EFFORTS to combat AIDS will require at least $2 billion a year by 1990, more than five times the present level of expenditure, according to a new study by the Institute of Medicine and the National Academy of Sciences.* About half the funds should be spent on research, but perhaps the most pressing need is to put more resources into explicit and extensive education programs, the report says.

The product of an intensive, 7-month effort, the report is perhaps the most comprehensive analysis yet undertaken of national programs to combat AIDS. Although it contains few surprises, it is likely to prove influential as the federal government and other groups grapple with issues ranging from the structure of federal AIDS programs to policies for screening people for antibodies to the AIDS virus.

The report identified "as a major concern a lack of cohesiveness and strategic planning throughout the national effort." It therefore recommends that a National Commission on AIDS be created to monitor and offer advice on national programs and to stimulate interaction between government, academic, and private groups. Although the report is somewhat vague on exactly how the commission would function, it would be appointed either by the President or jointly by the President and Congress and it would issue public reports. In addition, the report urges the President himself to take a strong leadership role in the national effort against AIDS. So far, AIDS has not been prominent on President Reagan's personal political agenda.



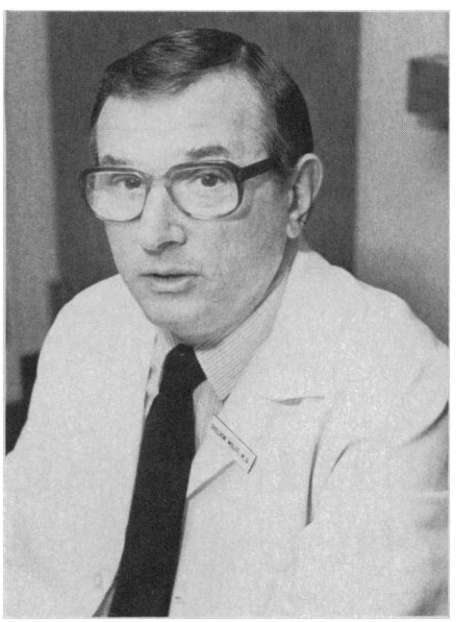
David Baltimore. *Cochaired committee and headed panel on AIDS research.*

The report's main message is that AIDS "isn't something confined to a subpopulation. It's a very serious problem for the whole community," says Sheldon Wolff, chairman of the department of medicine at Tufts University School of Medicine and cochairman (with David Baltimore, director of the Whitehead Institute at MIT) of the committee that produced the report.

The committee generally accepts government projections that perhaps a quarter of a million people will develop AIDS over the next 5 years—ten times the number reported in the past 5 years—and that about 74,000 new cases will be diagnosed in 1991 alone. Moreover, with perhaps 1.5 million people in the United States already infected with the AIDS virus, "disease and death . . . are likely to be increasing 5 to 10 years from now and probably into the next century," the committee notes.

Public education is likely to remain the best (perhaps the only) weapon to curb spread of infection with the AIDS virus over the next few years, but the committee identified major shortcomings in this area. Current federal education programs are "woefully inadequate," it says, and in spite of the blaze of publicity given to AIDS in recent years, there is still a good deal of ignorance about how it is transmitted.

For example, the report cites a survey of high school students in San Francisco, an epicenter of the disease, in which 40% said they were unaware that AIDS is caused by a virus, one-third thought the disease is casually transmitted, and 40% did not know that use of a condom during sexual intercourse decreases the risk of infection.



Sheldon Wolff. *Cochaired committee and headed panel on public health.*

The committee therefore recommends a "massive, coordinated" campaign to convey information in explicit and unambiguous terms about how AIDS is and is not transmitted. At least $1 billion a year, the bulk of it from the federal government, should be spent by the early 1990's on public health and education activities, the report recommends.

Education efforts should avoid vague terms, and they should include information and guidance on both risky and safe sexual practices. "If government agencies continue to be unable or unwilling to use direct, explicit terms in the detailed content of educational programs, contractual arrangements should be established with private organizations that are not subject to the same inhibitions," the committee says. This is a reference to the fact that federal education programs in the past have been restricted to the use of terms that are unlikely to give offense.

Although current high-risk groups are the

*"Confronting AIDS: Directions for Public Health, Health Care, and Research," National Academy Press, 2101 Constitution Avenue, NW, Washington, D.C. 20418.

obvious targets for education campaigns, the committee also argues that efforts to reach the general population should be greatly stepped up—especially in the schools. "Sex education in the schools is no longer only advice about reproductive choice, but has now become advice about a life-or-death matter," the report says.

Shortly before the report was released, Surgeon General C. Everett Koop issued his own report on AIDS†. Written by Koop himself in clear, unambiguous prose, it contains much of the kind of information the committee says should be made generally available. Koop, who had been briefed on the Institute of Medicine study, said in a statement that "There is now no doubt that we need sex education in schools and that it include information on sexual practices that put our children at risk for AIDS." He suggested that such programs should be introduced as early as the third grade.

In other public health areas, the committee encourages voluntary testing for antibodies to the AIDS virus but argues against mandatory screening, either of the general population or members of high-risk groups. Mandatory screening, it says, "would be impossible to justify now on either ethical or practical grounds." Asked whether that recommendation applies to the controversial issue of testing for life insurance, Wolff acknowledged that the committee found that to be a "sticky issue." In general, he said the committee felt such testing could be discriminatory. However, the report deals with the matter by not addressing it directly.

As far as research is concerned, the committee notes that there have been impressive advances in understanding the cause and spread of the disease, but it is not sanguine about the near-term prospects of producing effective therapies or vaccines. It recommends a steady increase in federal funds from about $300 million appropriated by Congress for fiscal year 1987 to at least $1 billion a year by the early 1990's.

In addition to increased funding for basic research and targeted programs for vaccine development and drug testing, the committee argues for more support for high-containment facilities, efforts to expand animal resources and conserve chimpanzee stocks, social science and behavioral research, and epidemiologic studies. It also notes with some concern that the proportion of funds spent by the National Institutes of Health on investigator-initiated research on AIDS has declined recently. "A more balanced growth of support is needed to promote the involvement of the nonfederal basic research community," the report states. ■

COLIN NORMAN

†"Surgeon General's Report on Acquired Immune Deficiency Syndrome," available free of charge from: AIDS, P.O. Box 14252, Washington, D.C. 20044.

NIH Begins Year-Long 100th Birthday Party

NIH, which began in a one-room lab and $300 grant, celebrates centennial of biomedical research with a budget that tops $6 billion. The year's events will culminate in a grand ball in Washington

In 1887, a physician named Joseph J. Kinyoun received $300 from the federal government to establish a hygiene laboratory in an attic room at the Marine Hospital on Staten Island, thereby laying the groundwork for what was to become the National Institutes of Health.

One hundred years later, at a centennial ceremony on the institute's 300-acre campus in Bethesda, Maryland, Senator Lowell P. Weicker (R–CT) told assembled researchers that "What you do is the greatest of all activities of government," adding that the proper way to celebrate the NIH centennial is not with "fireworks or ceremonies" but with money. "Nothing reflects priorities as unerringly as the federal budget," Weicker observed. "I hope that the celebration will be one of dollars," he said to resounding applause.

With an increase of more than 15% in funds for fiscal year 1987, just begun, the NIH budget has climbed to an all-time high of $6.2 billion, thanks in large part to Weicker's own determined efforts to see that Congress provided substantially more than the $4.9 billion that the Reagan Administration sought. It's not a bad start.

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"Many people who are reasonably well acquainted with the NIH find it hard to believe that we are approaching our 100th birthday," NIH director James B. Wyngaarden observed at the centennial opening. "Most would date our beginning as sometime around World War II."

However, the first 50 years of NIH were in many ways like the modern institutes, on a lesser scale. The work of Kinyoun, who is regarded as NIH's first director, recalls that from the very outset the link between basic research and medical needs was strong. When the government provided for the establishment of the Laboratory of Hygiene in 1887, cholera and other lethal infectious diseases were major threats to the public health. Kinyoun, fresh from Germany where he studied what was then modern bacteriology under the tutelage of Robert Koch, used his federal money for research that led him to discovery of the bacterium that causes cholera; as a result, he was widely credited with preventing major epidemics.

In 1891, Kinyoun's laboratory was moved from Staten Island to Washington, D.C., a move, Wyngaarden notes, that "underscored the status of the laboratory as a national resource." A decade later, its national role was further recognized when Congress appropriated what was probably