

News from Senator

BOB DOLE



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DOLE URGES CAUTION ON AIDS TESTING

The following is a floor statement made on May 21 by Senate Republican Leader BOB DOLE (R-KANSAS) urging a studied, cautious approach to AIDS Testing. The Senate was debating an amendment to the Supplemental Appropriations Bill offered by Senator Jesse Helms that would have mandated AIDS Testing for couples applying for a marriage license. Dole, who first urged the White House to establish a National Commission on AIDS, said some testing may be necessary but that a rush to judgement without all the facts would be a mistake.

I WOULD LIKE TO COMMENT ON THE AMENDMENT THAT MY DISTINGUISHED COLLEAGUE FROM NORTH CAROLINA HAS OFFERED REGARDING TESTING FOR AIDS. SENATOR HELMS HAS OFFERED AN AMENDMENT THAT WOULD WITHHOLD CERTAIN DESIGNATED FUNDS FROM STATES THAT DO NOT REQUIRE A NEGATIVE TEST FOR THE HUMAN IMMUNODEFICIENCY VIRUS BEFORE ISSUING A MARRIAGE LICENSE. IN ADDITION, THE AMENDMENT WOULD REQUIRE THAT AIDS TESTING BE DONE FOR THOSE INDIVIDUALS WHO WISH TO IMMIGRATE TO THE UNITED STATES.

AS THE MEMBERS OF THIS BODY KNOW, I AM INTERESTED IN THIS DISEASE AS DEMONSTRATED BY THE FACT THAT I, ALONG WITH MANY OF MY COLLEAGUES, INTRODUCED A RESOLUTION THAT CALLED ON THE PRESIDENT TO ESTABLISH A COMMISSION ON AIDS. IT WAS PASSED BY UNANIMOUS CONSENT. I THINK IT IS CLEAR THAT WE ARE ALL VERY CONCERNED AND WISH TO DEAL WITH THIS TERRIBLE DISEASE.

HOWEVER, WE MUST DEAL WITH IT IN A LOGICAL AND ORDERLY FASHION. TO MAKE A MISTAKE OR EVEN AN ERROR IN JUDGMENT AT THIS TIME COULD INTERFERE WITH OUR BEST EFFORTS TO PROTECT THE AMERICAN PUBLIC AND EVERY INDIVIDUAL CITIZEN. I SAY THIS WITH GOOD REASON -- AND WITH SPECIFIC REFERENCE TO MANDATING TESTING FOR ANY REASON AT THIS TIME.

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I HAVE BEEN WORKING WITH A NUMBER OF MY COLLEAGUES IN DEVELOPING AIDS LEGISLATION. IN DOING SO, WE HAVE CONSULTED WITH EXPERTS, INCLUDING PUBLIC HEALTH EXPERTS, SCIENTIFIC EXPERTS, FINANCING AND HEALTH CARE DELIVERY EXPERTS, - IN SHORT - EVERY KIND OF EXPERT WE CAN IDENTIFY. IN ADDITION, WE HAVE TALKED WITH SPECIAL INTEREST GROUPS AND THE PRIVATE SECTOR.

WHAT I HAVE LEARNED IS THAT THIS IS A VERY COMPLEX AREA AND REQUIRES CAREFUL THOUGHT. IN FACT, THERE WOULD BE NO NEED FOR A COMMISSION IF THE ANSWERS WERE OBVIOUS. WITH REGARD TO TESTING FOR MARRIAGE LICENSES, I HAVE BEEN INFORMED THAT THERE ARE MANY FALSE POSITIVE TESTS. THE PROPORTION OF FALSE POSITIVE TESTS VARY WITH THE GROUP BEING TESTED, BUT AT THE PRESENT TIME, A GROUP SUCH A PRE-MARRIAGE GROUP, A RED CROSS BLOOD BANK GROUP, OR ANY OTHER NORMAL GROUP, - AS OPPOSED TO A HIGH RISK GROUP, - WOULD HAVE A VERY HIGH INCIDENCE OF FALSE POSITIVE TESTS ON THE INITIAL SCREEN FOR AIDS.

IN FACT, A FULL 50-80% OF THE INITIAL POSITIVE SCREENING TESTS IN A NORMAL GROUP ARE FALSE POSITIVE RESULTS. THIS IS A VERY HIGH FIGURE. NOW, WHAT ARE WE GOING TO DO WITH THESE RESULTS? THIS AMENDMENT FOR EXAMPLE SAYS NOTHING ABOUT CONFIDENTIALITY. A YOUNG, HAPPY COUPLE WHO WISH TO FORM A STABLE FAMILY, IS SUDDENLY TOLD THAT ONE OR BOTH MAY HAVE AIDS! BUT THERE IS A 50-80% CHANCE THAT INFORMATION IS WRONG! OF COURSE THEY WILL HAVE TO UNDERGO REPEAT TESTING TO CONFIRM THE RESULTS. AGAIN, WHAT WILL HAPPEN TO THE TEST RESULTS? IT IS CLEAR THAT THE QUESTIONS SURROUNDING CONFIDENTIALITY AND DISCRIMINATION HAVE NOT BEEN DISCUSSED IN DEPTH YET, LET ALONE ANY GUIDELINES ISSUED. WILL JOBS BE LOST, CAREERS DESTROYED, FAMILIES INTERRUPTED - ALL FOR THE SAKE OF A FALSE POSITIVE TEST?

THE DEBATE WILL NOT BE EASY. WE DO NOT HAVE CLEAR-CUT RECOMMENDATIONS IN ANY OF THESE AREAS YET. BEFORE ANY TESTING IS MANDATED, IT SEEMS TO ME THAT WE MUST HAVE A BETTER IDEA OF WHAT WILL BECOME OF THE TEST RESULTS, AND HOW THE NEEDS OF THE INDIVIDUAL ARE GOING TO BE BALANCED WITH THE NEEDS OF SOCIETY. I WOULD SUGGEST THAT TO POTENTIALLY INTERFERE IN A MARRIAGE, OR IN THE ESTABLISHMENT OF A FAMILY WOULD NOT MEET ANYBODY'S NEEDS.

IN ADDITION, THE TEST IS EXPENSIVE. TO DO THE SERIES OF TESTS THAT HAVE TO BE DONE TO CONFIRM AN INITIAL POSITIVE TEST, COSTS AN AVERAGE OF \$105 PER POSITIVE TEST. ARE WE ARE GOING TO DEMAND A \$200 INVESTMENT FROM EVERYONE WHO WANTS TO GET MARRIED, AND A FULL 50-80% OF THOSE INDIVIDUALS WILL NOT HAVE AIDS OR BE INFECTED WITH THE AIDS VIRUS? THIS MAKES NO SENSE TO ME AT THIS TIME.

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NOW THIS IS NOT TO SAY THAT THERE IS NOT, OR NEVER WILL BE A NEED FOR MANDATORY TESTING IN SOME AREAS. I AM SAYING THAT TO TAKE ACTION NOW IS PREMATURE, AND IN FACT MAY DO MORE HARM THAN GOOD. FOR EXAMPLE, LET US CONSIDER HIGH RISK GROUPS. IF WE ARE TO BELIEVE OUR PUBLIC HEALTH EXPERTS, THEIR CURRENT RECOMMENDATIONS ARE TO PROVIDE VOLUNTARY TESTING, WITH COUNSELING. THE REASONS FOR THIS ARE CLEAR.

TO MANDATE TESTING IN HIGH RISK GROUPS MAY FORCE THEM TO 'GO UNDERGROUND', THUS NOT ONLY AVOIDING TESTING, BUT MORE IMPORTANTLY, MISSING THE COUNSELING THAT WOULD ACCOMPANY TESTING. WE ARE ALL IN AGREEMENT THAT EDUCATION IS THE ANSWER, SINCE THERE IS NO CURE OR VACCINE. HOWEVER, YOU CANNOT EDUCATE ANYONE IF THEY ARE AFRAID, AND WILL NOT COME IN FOR TESTING. THE HIGH RISK GROUPS MUST BE THE TARGETS FOR EDUCATION, AND PERHAPS IF WE CAN REACH ENOUGH OF THE INDIVIDUALS IN HIGH RISK GROUPS AND EDUCATE THEM, WE CAN HELP PREVENT SOME OF THE SPREAD OF THE DISEASE. HOWEVER, ONE THING IS CERTAIN, IF WE DO NOT REACH THEM, WE CANNOT EDUCATE THEM. SENIOR OFFICIALS OF THE PUBLIC HEALTH SERVICE HAVE TOLD US REPEATEDLY THAT COMPULSORY TESTING, AND THE RISK OF DISCRIMINATION IF RESULTS ARE NOT KEPT CONFIDENTIAL WOULD SCARE PEOPLE AWAY FROM THE HEALTH CARE SYSTEM.

WE HAVE TO MOVE VERY CAREFULLY AND WITH SOME DEGREE OF CAUTION IN THE AREA OF MANDATING TESTING. MISTAKES COULD BE MADE WHICH COULD INTERFERE WITH THE CONTROL OF THE DISEASE. I THINK IT IS PREMATURE TO BE MAKING DECISIONS ABOUT MANDATED TESTING. AGAIN, THAT IS NOT TO SAY THAT IT MAY NEVER BE APPROPRIATE, GIVEN THE POSSIBLE INCREASING ACCURACY OF THE TESTING. AS I SUGGESTED EARLIER, SOME MANDATES MAY MAKE SENSE IN THE FUTURE. FOR EXAMPLE, IT HAS BEEN SUGGESTED BY MANY THAT WE SHOULD TEST THOSE WHO DESIRE TO IMMIGRATE TO THE UNITED STATES. EVEN SOME OPPONENTS OF WIDE SCALE MANDATORY TESTING HAVE SUGGESTED THIS STEP MAY BE NECESSARY BECAUSE OF THE TREMENDOUS FINANCING PROBLEMS WE WILL BE FACING IN THE YEARS TO COME, IN ADDITION TO THE QUESTIONS RELATING TO THE INCREASED RISK FOR THE SPREAD OF THE DISEASE. THE QUESTION OF WHO SHOULD SHARE OUR SCARCE RESOURCES SHOULD, AND WILL, BE DISCUSSED. I AM PREPARED TO SUPPORT THE EFFORT TO TEST NEW IMMIGRANTS, HOWEVER WE MUST ALSO BE PREPARED TO DECIDE WHAT POSITION WE WILL TAKE REGARDING THOSE WHO ARE ALREADY IN THE UNITED STATES AND ARE APPLYING FOR RESIDENCY UNDER OUR NEW AMNESTY LAW.

MR. PRESIDENT, I MUST AT THIS TIME DECLINE TO SUPPORT MANDATORY TESTING FOR AIDS, BECAUSE IT IS NOT CLEAR TO ME THAT THAT IS THE BEST WAY TO HANDLE THE DISEASE. IT WOULD CERTAINLY BE GOING AGAINST THE ADVICE OF PUBLIC HEALTH EXPERTS, AND I'M NOT SURE WE SHOULD BE LEGISLATING PUBLIC HEALTH POLICY WHEN THE DEBATE IS SO ACUTE. I PERSONALLY NEED MORE INFORMATION. TO QUOTE FROM THE HIPPOCRATIC OATH, "ABOVE ALL ELSE DO NO HARM". I BELIEVE THAT WAS A GOOD RECOMMENDATION FOR OUR PHYSICIANS, I THINK IT IS GOOD ADVICE FOR US.

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