

Address

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PRESENTED TO THE NATIONAL FOUNDATION FOR INFECTIOUS DISEASES WASHINGTON, D.C. NOVEMBER 21, 1988 (GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

I AM DEEPLY HONORED BY BEING CHOSEN AS THE FIRST RECIPIENT OF THE MAXWELL FINLAND AWARD.

DR. FINLAND PLAYED A VERY IMPORTANT ROLE IN THE EVOLUTION OF MODERN MEDICAL PRACTICE, AS WE'VE ALL HEARD. HAVING KNOWN HIM AND HIS WRITINGS AND THE KIND OF SCIENTIST THAT HE WAS, I AM ESPECIALLY GRATEFUL FOR THIS EVENING'S HONOR. I'M ALSO PLEASED TO SEE SO MANY OF MY COLLEAGUES FROM THE U.S. PUBLIC HEALTH SERVICE HERE THIS EVENING. I WON'T SINGLE OUT ANY ONE PERSON. RATHER, I'D LIKE TO ACKNOWLEDGE THE EXTRAORDINARY QUALITY OF PEOPLE WHO SERVE OUR COUNTRY IN THE P.H.S.

MOST OF THEM ARE CIVIL SERVANTS, WHILE A FEW -- SOME 5,300 -- SERVE IN THE UNIFORM OF THE COMMISSIONED OFFICERS CORPS. I AM THEIR SURGEON GENERAL AND SO, TO A GREAT EXTENT, I MAY HAVE ARRIVED HERE THIS EVENING -- TO BE TREATED WITH SUCH WARMTH AND GRACE -- BECAUSE THERE <u>IS</u> SUCH AN ORGANIZATION AS THE U.S. PUBLIC HEALTH SERVICE AND BECAUSE IT <u>IS EXCELLENT</u>.

AND SO, WITH YOUR INDULGENCE, I THOUGHT I MIGHT PUBLICLY ACKNOWLEDGE MY DEBT AND MY AFFECTION FOR AN EXCELLENT ORGANIZATION AND THE PEOPLE WHO KEEP IT SO. NOW, THIS HAS BEEN A LONG DAY FOR MANY OF YOU -- ESPECIALLY FOR YOU, CHAIRMAN ROGERS, WHO WELCOMED EVERYONE TO THIS THIRD NATIONAL FORUM SOME 13 HOURS AGO -- SO I WILL KEEP MY REMARKS AS BRIEF AND TO THE POINT AS POSSIBLE.

AS YOU KNOW, I CAME TO WASHINGTON A BIT OVER 7 YEARS AGO, FRESH FROM A LONG CAREER AS A PEDIATRIC SURGEON. FOR NEARLY 40 YEARS I LOOKED AT MEDICAL PROBLEMS AND TRIED TO SOLVE THEM WITH THE SKILLS IN MY OWN TWO HANDS. AND I SUSPECT THAT, SUBCONSCIOUSLY, I THOUGHT THAT WAS WHAT HEALTH CARE AND MEDICAL CARE WERE ALL ABOUT. MOST PHYSICIANS HAVE THAT QUITE NATURAL BIAS, THAT HEALTH CARE IS THE SUM TOTAL OF THE PATCHING UP THEY DO FOR THEIR PATIENTS. AND, TO A CERTAIN EXTENT, I GUESS IT IS.

BUT NOT ALTOGETHER. AND LESS SO IN THE FUTURE.

AND THAT'S ONE OF THE MAIN LESSONS I'VE LEARNED, DURING MY TWO TERMS AS YOUR SURGEON GENERAL. VIRTUALLY EVERY MAJOR HEALTH ISSUE I'VE HAD TO DEAL WITH HAS HAD -- AT ITS VERY HEART -- THE WAY PEOPLE BEHAVE ... THE WAY THEY BEHAVE TOWARD THEMSELVES ... THE WAY THEY BEHAVE TOWARD OTHERS THEY KNOW AND LOVE ... AND THE WAY THEY BEHAVE TOWARD OTHERS THEY <u>DON'T</u> KNOW AT ALL.

SHALL I LIST SOME OF THOSE ISSUES? I'LL NAME JUST A HANDFUL:

SMOKING ... THE ABUSE OF ALCOHOL ... UNWANTED PREGNANCIES ... CHILD ABUSE AND OTHER FORMS OF FAMILY VIOLENCE ... AND INFECTIOUS DISEASES SUCH AS HEPATITIS B ... AND, COURSE, AIDS. I'LL STOP RIGHT THERE, ALTHOUGH THE FULL LIST IS A GOOD DEAL LONGER.

BUT AT THE BASE OF EACH OF THOSE PAINFUL, TRAGIC, DESTRUCTIVE, AND <u>PREVENTABLE</u> HEALTH PROBLEMS IS AN EQUALLY TRAGIC AND DESTRUCTIVE HUMAN BEHAVIOR.

THIS IS NOT AN EASY SUBJECT TO DISCUSS IN A DEMOCRACY, BECAUSE WE PRIDE OURSELVES ON LETTING THE INDIVIDUAL MAKE THE DECISION AS TO WHAT HE OR SHE WANTS OUT OF LIFE. AND THE REST OF US HAVE AGREED -- SO FAR, ANYWAY -- THAT WE WILL PAY ALMOST ANY PRICE TO KEEP THAT PART OF OUR SOCIAL COMPACT ALIVE AND WELL.

HENCE, WE PUT A GREAT DEAL OF HUMAN AND MATERIAL RESOURCES INTO VACCINE RESEARCH AND DELIVERY ... INTO DRUG DEVELOPMENT ... INTO PHYSICAL AND MENTAL HEALTH THERAPIES OF EVERY KIND ... INTO THOSE KINDS OF MEDICAL AND PUBLIC HEALTH RESPONSES THAT ARE <u>AFTER THE FACT</u>.

AND WE TURN TO LARGE, BROAD-BRUSH KINDS OF PUBLIC EDUCATION PROGRAMS TO DO THE TOUGH, LONG-TERM JOB OF CORRECTING HAZARDOUS, HIGH-RISK HUMAN BEHAVIOR. ALSO <u>AFTER THE FACT</u>. AT THIS 3RD ANNUAL FORUM, FOR EXAMPLE, WE'RE VERY CONCERNED -- AND RIGHTLY SO -- ABOUT THE SAFETY OF THE HEALTH WORKFORCE, IN REGARD TO HEPATITIS B AND AIDS.

WE HAVE TWO MAJOR INSTRUMENTS TO WORK WITH: A NEW HEPATITIS B VACCINE ... AND THE INDIVIDUAL HEALTH WORKER. BUT THE VACCINE WORKS ONLY IF THE INDIVIDUAL HEALTH WORKER AND HIS OR HER SUPERVISOR HAVE THE <u>GOOD SENSE</u> AND <u>ENLIGHTENED SELF-INTEREST</u> TO WANT THE PROTECTION OF THE HEPATITIS VACCINE <u>NOW</u>.

AS FOR AIDS, WE STILL HAVE A FEW YEARS TO GO BEFORE A VACCINE IS GENERALLY AVAILABLE. HENCE, WE MUST RELY <u>SOLELY</u> ON THE JUDGMENT AND PERSONAL BEHAVIOR OF INDIVIDUAL HEALTH WORKERS FOR THEIR PROTECTION AGAINST THE AIDS VIRUS. I BELIEVE THE PEOPLE IN OUR HEALTH WORKFORCE ARE GOOD PEOPLE ... RESPONSIBLE PEOPLE ... BUT THEY'RE ALSO PEOPLE WHO ARE CAUGHT -- AS THE <u>REST</u> OF US HAVE BEEN CAUGHT -- IN THE SHIFTING TIDES OF NATIONAL CULTURE AND COMMON VALUES.

FOR EXAMPLE, I THINK THERE'S A DIRECT, STRAIGHT-LINE RELATIONSHIP BETWEEN THE 1960s, WHEN MANY CONSTRAINTS DISAPPEARED, CONCERNING EXPERIMENTATION WITH DRUGS AND SEXUALITY ... AND THE 1970s, WHEN SUCH EXPERIMENTATION BECAME RATHER WIDESPREAD AMONG YOUNG PEOPLE IN OUR SOCIETY ... AND THE 1980s, WHEN THE TRAGIC RESULTS OF MUCH OF THAT BEHAVIOR CAN BE MORE CLEARLY SEEN. AND SO WE'VE BEEN BUSY THE PAST FEW YEARS POSTING THE WEEKLY TALLIES OF DRUG OVERDOSE DEATHS ... OF "CHILDREN HAVING CHILDREN" ... OF VICTIMS OF A NEW EPIDEMIC OF SYPHILIS ... OF THE ESCALATING NUMBERS OF PEOPLE WITH RESISTANT STRAINS OF GONORRHEA ... AND OF THE EXPANDING CASELOAD OF PEOPLE WHO WERE INCUBAT-ING THE AIDS VIRUS UNTIL THE "RIGHT" OPPORTUNISTIC DISEASE CAME ALONG.

IN MANY AREAS OF MEDICINE AND PUBLIC HEALTH, WE'RE MAKING EXCELLENT PROGRESS: HYPERTENSION SCREENING, ORGAN TRANSPLANTATION, CANCER DETECTION AND CONTROL, AND SO ON. BUT IN MANY OTHER AREAS, WE SEEM TO BE RUNNING IN PLACE, IF NOT ACTUALLY FALLING BEHIND. THE STATISTICS ARE NOT GOOD. FAR TOO MANY PEOPLE IN OUR SOCIETY HAVE FALLEN VICTIM TO DEBILITATING AND DEADLY DISEASE. AND WE SUSPECT THAT THE WORST NUMBERS MAY NOT BE IN YESTERDAY'S FILES. RATHER, THEY MAY SHOW UP IN THE TALLY SHEETS OF TOMORROW AND THE DAY AFTER.

I AM REMINDED OF THOSE PEOPLE WHO TRY TO CAP A RAGING OIL-WELL FIRE. THE VISIBLE FLAME AT THE SURFACE IS FRIGHTENING ENOUGH. BUT THE ROOT CAUSE OF SUCH A FIRE LIES DEEP UNDERGROUND, IN SOME MAJOR GEOLOGICAL FAULT OR IN SUBTERRANEAN CHANGES OF PRESSURE. LIKE ALL OF YOU, I ALSO AM CONCERNED ABOUT THE SAFETY OF EVERY HEALTH WORKER IN OUR COUNTRY. BUT I KNOW THAT, IF ANY OF THEM ARE FUNCTIONING IN HAZARDOUS OR HIGH-RISK WAYS, THE REASON MAY BE NOT SO MUCH A LACK OF KNOWLEDGE OF C.D.C GUIDELINES AS IT IS THEIR EVOLVING PERSONAL LIFESTYLES OF HIGH-RISK BEHAVIOR AND LOW SELF-ESTEEM IN GENERAL.

THE PROBLEM BEGINS EARLY, IN OUR SCHOOLS AND IN THE PRIVACY OF OUR HOMES ... PLACES WHERE PUBLIC HEALTH AUTHORITIES AND BIOMEDICAL EXPERTS ARE NOT SUPPOSED TO GO. BUT THOSE PLACES ARE THE FRONTIER IN MEDICINE AND PUBLIC HEALTH. THAT'S WHERE THE TRUE PHYSICAL AND MENTAL HEALTH OF A WHOLE NEW GENERATION OF AMERICANS IS TAKING SHAPE.

AND SO I BELIEVE WE HAVE A SPECIAL CHALLENGE BEFORE US, AT THIS TIME IN OUR HISTORY WHEN <u>PERSONAL FREEDOM</u> AND <u>PERSONAL</u> <u>RESPONSIBILITY</u> ARE IN A SOMEWHAT UNEASY BALANCE.

WE NEED TO FIND WAYS -- EFFECTIVE, YET CONSISTENT WITH AMERICAN TRADITION -- WAYS TO HELP YOUNG PEOPLE -- <u>SCHOOLCHILDREN</u> -- DEVELOP A HEALTHY SENSE OF THEIR OWN PERSONAL WORTH, AS WELL AS A GENUINE APPRECIATION OF THE WORTH OF EVERYONE ELSE. IT IS, AFTER ALL, A COMMON HUMAN TRAIT, OR INSTINCT, TO PROTECT THE THINGS -- AND THE PEOPLE -- WE TRULY VALUE. WE OUGHT TO EXPLOIT THAT TRAIT MUCH MORE THAN WE DO, IN THE NAME OF PUBLIC HEALTH. AND WE OUGHT TO REINFORCE IT AMONG OUR CHILDREN.

IF WE DO, IT MAY WELL BE THE MOST IMPORTANT CONTRIBUTION WE CAN MAKE TO THE HEALTH OF ALL AMERICANS WHO ARE TO COME OF AGE IN THE NEXT CENTURY.

THANK YOU.

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