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UNITED STATES AND JAPAN ESTABLISH JOINT PANEL ON AIDS

The United States and Japan have issued a joint communique establishing a new biomedical panel to foster collaborative research on acquired immunodeficiency syndrome (AIDS). The announcement came during the 23rd Joint Committee Meeting of the United States-Japan Cooperative Medical Science Program (U.S.-Japan CMSP) held recently at the National Institutes of Health in Bethesda, Maryland.

The joint panel will be composed of five scientists from each country. The panel members will encourage bilateral collaboration and convene annual scientific meetings to promote the sharing of information, materials, and techniques in AIDS research. Selection of panel members by officials in each country is expected to take place soon.

Officials of the National Institute of Allergy and Infectious Diseases (NIAID), which administers the U.S. program, have chosen Dr. Martin L. PadarathSingh, chief of the NIAID AIDS Program Pathogenesis Branch, as program officer for the U.S. Panel on AIDS. Japanese officials have designated Dr. M. Ito, director of the Office of Infectious Disease Control, Ministry of Health and Welfare, as program officer for the Japanese Panel on AIDS.

The purpose of the U.S.-Japan CMSP as conceived in 1965 by President Lyndon Johnson and Prime Minister Eisaku Sato was to provide a means by which the scientific expertise in both countries could be combined and focused on improving specific health problems of the people in Asia. The new AIDS panel is expected to benefit the larger international community as well.

While recognizing many important aspects of AIDS research, the guidelines for the AIDS panel assign high priority to particular research areas. These include the following:

1. To develop drugs and vaccines to prevent and treat AIDS, and to establish in vivo and in vitro model evaluation systems.
2. To conduct clinical and epidemiological studies to determine the risk factors for infections caused by HIV and other retroviruses.
3. To conduct basic research into the causes of AIDS.
4. To conduct follow-up studies to determine how frequently either immunodeficiency or neurological disorders occur as a consequence of chronic HIV infection.
5. To identify and conduct long-term studies of populations at high risk for developing HIV infection.
6. To exchange information and share techniques and materials pertinent to studying human retrovirus infections.
At present, AIDS affects relatively few people in Japan as compared with in the United States. As of July 8, only 43 AIDS cases had been reported by Japan to the World Health Organization, and only 161 cases had been reported by Asian countries overall. AIDS cases in the United States now total nearly 38,000.

However, the death of the first female in Japan this past January--and thus the implied threat of AIDS spreading among heterosexuals--transformed AIDS into a prominent public concern in Japan. The Japanese government has responded quickly, initiating special programs to try to contain this disease.

AIDS will be the tenth area of study established by the U.S.-Japan CMSP. Six panels were created at the inception of the program: cholera, leprosy, tuberculosis, malnutrition, parasitic diseases, and viral diseases. Since then, three other study areas have been added: environmental mutagenesis and carcinogenesis, hepatitis, and immunology.

Dr. Ivan L. Bennett, Jr., professor of medicine at New York University, and Dr. Shiro Someya, advisor at the Institute of Public Health in Tokyo, currently serve as co-chairmen of the U.S.-Japan CMSP. Expressing his opinion about the formation of the new panel, Dr. Bennett commented "I'm very enthusiastic about it. It's a perfect opportunity to take advantage of all our collaboration in the past to work on a very important problem."

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