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Andrea L. Weddle

August 11, 2009

Department of Health and Human Services
Centers for Disease Control and Prevention
Division of Global Migration and Quarantine
Attn: 34 NPRM Comments
1600 Clifton Road, NE, MS E-03

Atlanta, GA 30333

Submitted via email to: Part34HIVcomments@cdc.gov

Docket ID: CDC-2008-0001

RE: **Support from HIV Clinicians and Researchers for Lifting the HIV Immigration Ban**

I am writing on behalf of the HIV Medicine Association (HIVMA) to applaud the Centers for Disease Control and Prevention (CDC) for its proposal to remove HIV infection from the list of communicable diseases of public health significance. Specifically, I am writing in response to the changes that are proposed to 42 CFR part 34 in the July 2nd *Notice of Proposed Rule Making*.

HIVMA represents more than 3,600 HIV clinicians and researchers that work on the frontline of the HIV pandemic in the U.S. and abroad. Nested within HIVMA and the Infectious Diseases Society of America (IDSA), is the Center for Global Health Policy that is dedicated to ensuring that policymakers, federal agencies, non-governmental organizations, and the media have access to solid, evidence-based input and guidance from IDSA/HIVMA physician scientists and other professional colleagues from both developed and developing countries.


The proposal to eliminate the discriminatory practice of excluding people with HIV from travel and immigration to the U.S. is long overdue and represents sound, science-driven public policy that will benefit public health globally. As the CDC acknowledges, much has been learned about HIV transmission since the HIV immigration and travel policy was implemented more than 20 years ago. Importantly – we now know that HIV is not transmitted via casual contact but rather is transmitted via specific behaviors with absolutely no relationship to nationality.

In addition to supporting the removal of HIV from the list of conditions of public health significance, we strongly agree with the proposal to discontinue mandatory HIV testing as part of the medical screening required of most immigrants and refugees. Since the medical examination is limited to diseases that exclude individuals from travel or immigration to the U.S., the approach recommended by the CDC is appropriate. A failure to remove HIV testing from the medical examination would send a confusing message as HIV disease would continue to be treated differently than other conditions that are not on the exclusion list. We also have concerns regarding privacy and other protections that may or may not be in place in the country of origin and the ability of the medical examiner to effectively link individuals that test positive to medical care. While we are strong proponents of voluntary routine HIV testing as an important intervention to link people with HIV to care, we agree with the CDC proposal to remove HIV testing from the medical screening process.

As a global leader in the fight against AIDS, it is critical for all U.S. public policies to be evidenced based and scientifically justified. The ill-conceived HIV immigration ban has tarnished our image internationally and this policy change is long overdue. Ironically, the very people to whom we have extended lifesaving treatment services have not been welcome here in the U.S. This has included our scientific and medical colleagues from abroad who are living with HIV infection. We have an obligation to do everything that we can to end the deadly stigma that an HIV diagnosis still carries in communities and countries around the globe—stigma that discourages persons from finding out their serostatus and ultimately helps to facilitate HIV transmission in the community. Ending the HIV travel and immigration ban is an important step for us to take here at home to reduce the barrier that stigma presents to lifesaving treatment and prevention strategies.

We urge the CDC to move quickly to finalize the rule and implement this important policy change. Please do not hesitate to contact us through the HIVMA executive director, Andrea Weddle, at (703) 299-0915 or aweddle@hivma.org.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Arlene Bardeguet". The signature is fluid and cursive, with a large initial "A" and "B".

Arlene Bardeguet, MD, MPH
Chair, HIV Medicine Association Board of Directors