

would be ineffective for a person with this HIV strain.

Although drug-resistant HIV strains are common in patients who have been treated with antiretroviral drugs, multiple-drug-resistant HIV is extremely rare in patients who are newly diagnosed and previously untreated. Moreover, while HIV infection usually takes about 10 years to progress to AIDS, this patient apparently progressed to AIDS in a matter of months. Combination of a highly drug resistant HIV infection and rapid disease progression has the potential to become a very serious public health problem with global health implications.

The ultimate significance of the new strain is still unknown. Only time will tell whether this was an isolated case or part of an outbreak of similar cases. It is imperative, however, that we take action to identify and halt the spread of aggressive, multiresistant HIV/AIDS strains.

We must continue to build upon and fund existing prevention programs and to strengthen our infectious disease monitoring systems. The CDC, in collaboration with community, state, national, governmental and nongovernmental partners, employs a number of programs designed to prevent HIV infection and reduce the incidence of HIV-related illness and death. By providing financial and technical support for disease surveillance; risk-reduction counseling; street and community outreach; school-based education on AIDS; prevention case management; and prevention and treatment of other sexually transmitted diseases that can increase risks for HIV transmission, such programs have played a key role in reducing HIV transmission.

Stopping the spread of this strain is also critical in order to preserve the effectiveness of existing HIV/AIDS therapies. Not only do such therapies prolong and improve the quality of life of those affected by HIV/AIDS, but they also play a vital role in preventing the spread of the disease. A recent study found that HIV therapies reduce infectiousness by 60 percent. Consequently, that is why I recently reintroduced S. 311, the Early Treatment for HIV Act, ETHA. Supported by a bipartisan group of 31 Senators, ETHA redresses a fundamental flaw under the current Medicaid system that provides access to care only after individuals have developed full blown AIDS.

ETHA brings Medicaid eligibility rules in line with Federal Government guidelines on the standard of care for treating HIV. ETHA helps address the fact that increasingly, in many parts of the country, there are growing waiting lists for access to life-saving medications and limited access to comprehensive health care. Access to HIV therapies reduces the amount of HIV virus present in a person's bloodstream, viral load, a key factor in curbing infectiousness and reducing the ability to transmit HIV.

Early access to HIV therapies as provided under ETHA would not only

delay disease progression and increase life expectancy, but it would also reduce the need for more expensive treatment and costly hospital stays. According to a study conducted by PricewaterhouseCoopers, ETHA would reduce gross Medicaid costs by 70 percent, saving the Federal Government approximately \$1.5 billion over 10 years. With the administration looking for ways to reduce Medicaid costs, passing ETHA would be a good start. It's also the right thing to do.

#### SAFE GUN STORAGE SAVES LIVES

Mr. LEVIN. Mr. President, the debate on how to most effectively combat gun violence frequently centers on the ability of criminals to access dangerous firearms. Today, I would like to call my colleagues' attention to another important issue in our fight against gun violence: the ability of our teenagers and children to access firearms. Safe storage and child access prevention laws are critical steps as we seek to reduce the occurrence of accidental shootings and suicides involving guns. Such tragedies have claimed the lives of thousands of young people and destroyed families even though many of these occurrences could have been prevented by common sense legislation.

According to a Journal of the American Medical Association study released in 2001, suicide is the third-leading cause of death among youth aged 10 to 19. Between 1976 and 2001, the period of the study, nearly 40,000 youth aged 14 to 20 committed suicide using a gun. The study also found that there was a significant reduction in youth suicide rates in States that had child access prevention laws. Unlike suicide attempts using other methods, suicide attempts with guns are nearly always fatal. These children get no second chance.

The Brady Campaign to Prevent Gun Violence reported in 2004 that teenagers and children are involved in more than 10,000 accidental shootings in which close to 800 people die each year. Further, about 1,500 children age 14 and under are treated in hospital emergency rooms for unintentional firearm injuries. About 38 percent of them have injuries severe enough to require hospitalization. Blocking unsupervised access to loaded guns is the key to preventing these occurrences.

A study published last week in the Journal of the American Medical Association found that the risk of unintentional shooting or suicide by minors using a gun can be significantly reduced by adopting responsible gun safety measures. According to the study, when ammunition in the home is locked up, the risk of such injuries is reduced by 61 percent. Simply storing ammunition separately from the gun reduces such occurrences by more than 50 percent.

During the 108th Congress, I joined with 69 of my colleagues in voting for Senator BOXER's trigger lock amend-

ment. Senator BOXER's amendment would have required that all handguns sold by a dealer come with a child safety device, such as a lock, a lock box, or technology built into the gun itself that would increase the security of the weapon while in storage. The underlying gun industry immunity bill to which this amendment was attached was later defeated in the Senate, but the need and support for this legislation is clear. In light of the bipartisan support for this trigger lock amendment during the last Congress, I am hopeful that the 109th Congress will take up and pass common sense trigger lock legislation.

While the problems of youth suicide and accidental shooting cannot be legislated away, trigger locks and other sensible gun safety measures can help limit children's access to firearms. It is clear that reducing our kids' access to guns can save lives. The time has come to support the efforts of States who have enacted common sense child access prevention laws and make responsible storage of firearms standard around the Nation.

#### HEALTH ACT

Mr. ENSIGN. Mr. President, last week, I reintroduced the HEALTH Act to address the national crisis our doctors, hospitals and those needing healthcare face today.

Every day, patients in Nevada and across America are losing access to healthcare services. Several states are losing medical professionals at an alarming rate, leaving thousands of patients without a healthcare provider to serve their needs.

Because of increasing medical liability insurance premiums, it is now common for obstetricians to no longer deliver babies, and for other specialists to no longer provide emergency calls or perform certain high-risk procedures.

Women's health in Nevada and elsewhere in the country is in serious jeopardy as new doctors turn away from specialties and as practicing doctors close their doors.

I have been told that one in seven fellows of the American Academy of Obstetricians and Gynecologists have stopped practicing obstetrics because of the high risk of liability claims.

When Ms. Jill Forte of Las Vegas, found out that she was pregnant with her second child, she called her doctor. The doctor told her that because of insurance costs, she could no longer deliver her baby. So Jill started calling around. She was told the same thing by five different doctors. She even considered going to California for care.

Fortunately, Ms. Forte was able to make a connection through a friend for a local doctor to take her case. She said:

I was in total shock. I didn't know what was going on until it happened. Looking for a doctor, worried about finding a doctor when you're pregnant is a stress that is an unnecessary stress. It's a stress caused by