

105TH CONGRESS
1ST SESSION

H. R. 2130

To amend the Public Health Service Act to provide for expanding, intensifying, and coordinating activities of the National Heart, Lung, and Blood Institute with respect to heart attack, stroke, and other cardiovascular diseases in women.

IN THE HOUSE OF REPRESENTATIVES

JULY 9, 1997

Ms. WATERS (for herself, Mr. ACKERMAN, Mr. BOUCHER, Ms. BROWN of Florida, Ms. CHRISTIAN-GREEN, Ms. CARSON, Mrs. CLAYTON, Mr. CLYBURN, Mr. CONYERS, Mr. CUMMINGS, Mr. DAVIS of Illinois, Ms. DEGETTE, Mr. DELLUMS, Mr. ENGEL, Mr. EVANS, Mr. FALEOMAVAEGA, Mr. FAZIO of California, Mr. FILNER, Mr. FROST, Mr. GUTIERREZ, Mr. HASTINGS of Florida, Mr. HILLIARD, Ms. JACKSON-LEE of Texas, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. KILDEE, Mr. LEWIS of Georgia, Ms. LOFGREN, Mrs. LOWEY, Mrs. MALONEY of New York, Mr. McDERMOTT, Ms. McKINNEY, Mrs. MINK of Hawaii, Mrs. MORELLA, Ms. NORTON, Mr. PAYNE, Ms. PELOSI, Ms. RIVERS, Ms. ROYBAL-ALLARD, Mr. RUSH, Mr. SANDERS, Ms. SLAUGHTER, Mr. STOKES, Mr. THOMPSON, Mr. TOWNS, Mr. UNDERWOOD, Mr. WATT of North Carolina, Mr. CLAY, Mr. CLEMENT, Mr. DIXON, Ms. ESHOO, Mr. FATTAH, Mr. FLAKE, Mr. FORD, Ms. KILPATRICK, Mrs. KENNELLY of Connecticut, Mrs. MEEK of Florida, Ms. MILLENDER-McDONALD, Mr. OWENS, Mr. PASTOR, Mr. ROMERO-BARCELÓ, Mr. SCOTT, Mr. SERRANO, Ms. VELÁZQUEZ, Mr. WEYGAND, Ms. WOOLSEY, Mr. WAXMAN, Mr. WYNN, Mr. BARRETT of Wisconsin, Mr. CAPPS, Mr. DELAHUNT, Mr. SHERMAN, Mr. GREEN, Mrs. ROUKEMA, Mr. JEFFERSON, and Mr. MATSUI) introduced the following bill; which was referred to the Committee on Commerce

A BILL

To amend the Public Health Service Act to provide for expanding, intensifying, and coordinating activities of the

National Heart, Lung, and Blood Institute with respect to heart attack, stroke, and other cardiovascular diseases in women.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Women’s Cardio-
5 vascular Diseases Research and Prevention Act”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds as follows with respect to women
8 in the United States:

9 (1) Heart attack, stroke, and other cardio-
10 vascular diseases are the leading causes of death in
11 women.

12 (2) Heart attacks and strokes are leading
13 causes of disability in women.

14 (3) Cardiovascular diseases claim the lives of
15 more women each year than does cancer. Each year
16 more than 500,000 females die of cardiovascular dis-
17 eases, while approximately 254,000 females die of
18 cancer. Heart attack kills more than 5½ times as
19 many females as breast cancer. Stroke kills twice as
20 many females as breast cancer.

21 (4) More than 1 in 5 females has some form of
22 cardiovascular disease. Of females under age 65,
23 each year approximately 20,000 die of heart attacks.

1 In the case of African-American women, from ages
2 35 to 74 the death rate from heart attacks is 38
3 percent higher than that of white women.

4 (5) Each year since 1984, cardiovascular dis-
5 eases have claimed the lives of more females than
6 males. In 1993, of the number of individuals who
7 died of such diseases, 52 percent were females and
8 48 percent were males.

9 (6) The clinical course of cardiovascular dis-
10 eases is different in women than in men, and cur-
11 rent diagnostic capabilities are less accurate in
12 women than in men. Once a woman develops a car-
13 diovascular disease, she is more likely than a man to
14 have continuing health problems, and she is more
15 likely to die.

16 (7) Of women who have had a heart attack, ap-
17 proximately 44 percent die within 1 year of the at-
18 tack. Of men who have had such an attack, 27 per-
19 cent die within 1 year. At older ages, women who
20 have had a heart attack are twice as likely as men
21 to die from the attack within a few weeks. Women
22 are more likely than men to have a stroke during the
23 first 6 years following a heart attack. More than 60
24 percent of women who suffer a stroke die within 12
25 years. Long-term survivorship of stroke is better in

1 women than in men. Of individuals who die from a
2 stroke, each year approximately 61 percent are fe-
3 males. In 1993, 91,060 females died from strokes.
4 Women have unrecognized heart attacks more fre-
5 quently than men. Of women who died suddenly
6 from heart attack, 63 percent had no previous evi-
7 dence of disease.

8 (8) More than half of the annual health care
9 costs that are related to cardiovascular diseases are
10 attributable to the occurrence of the diseases in
11 women, each year costing this nation hundreds of
12 billions of dollars in health care costs and lost pro-
13 ductivity.

14 (9) A number of recent studies have found that
15 hormone replacement therapy contributes to the re-
16 duction of risk factors for cardiovascular disease in
17 postmenopausal women and may reduce the risk of
18 cardiovascular mortality in such women by as much
19 as 50 percent.

1 **SEC. 3. EXPANSION AND INTENSIFICATION OF ACTIVITIES**
2 **REGARDING HEART ATTACK, STROKE AND**
3 **OTHER CARDIOVASCULAR DISEASES IN**
4 **WOMEN.**

5 Subpart 2 of part C of title IV of the Public Health
6 Service Act (42 U.S.C. 285b et seq.) is amended by insert-
7 ing after section 424 the following section:

8 “HEART ATTACK, STROKE, AND OTHER CARDIOVASCULAR
9 DISEASES IN WOMEN

10 “SEC. 424A. (a) IN GENERAL.—The Director of the
11 Institute shall expand, intensify, and coordinate research
12 and related activities of the Institute with respect to heart
13 attack, stroke, and other cardiovascular diseases in
14 women.

15 “(b) COORDINATION WITH OTHER INSTITUTES.—
16 The Director of the Institute shall coordinate activities
17 under subsection (a) with similar activities conducted by
18 the other national research institutes and agencies of the
19 National Institutes of Health to the extent that such Insti-
20 tutes and agencies have responsibilities that are related
21 to heart attack, stroke, and other cardiovascular diseases
22 in women.

23 “(c) CERTAIN PROGRAMS.—In carrying out sub-
24 section (a), the Director of the Institute shall conduct or
25 support research to expand the understanding of the
26 causes of, and to develop methods for preventing, cardio-

1 vascular diseases in women. Activities under such sub-
2 section shall include conducting and supporting the follow-
3 ing:

4 “(1) Research to determine the reasons under-
5 lying the prevalence of heart attack, stroke, and
6 other cardiovascular diseases in women, including
7 African-American women and other women who are
8 members of racial or ethnic minority groups.

9 “(2) Basic research concerning the etiology and
10 causes of cardiovascular diseases in women.

11 “(3) Epidemiological studies to address the fre-
12 quency and natural history of such diseases and the
13 differences among men and women, and among ra-
14 cial and ethnic groups, with respect to such diseases.

15 “(4) The development of safe, efficient, and
16 cost-effective diagnostic approaches to evaluating
17 women with suspected ischemic heart disease.

18 “(5) Clinical research for the development and
19 evaluation of new treatments for women, including
20 rehabilitation.

21 “(6) Studies to gain a better understanding of
22 methods of preventing cardiovascular diseases in
23 women, including applications of effective methods
24 for the control of blood pressure, lipids, and obesity.

1 “(7) Information and education programs for
2 patients and health care providers on risk factors as-
3 sociated with heart attack, stroke, and other cardio-
4 vascular diseases in women, and on the importance
5 of the prevention or control of such risk factors and
6 timely referral with appropriate diagnosis and treat-
7 ment. Such programs shall include information and
8 education on health-related behaviors that can im-
9 prove such important risk factors as smoking, obe-
10 sity, high blood cholesterol, and lack of exercise.

11 “(d) ACTIVITIES REGARDING HORMONE REPLACE-
12 MENT THERAPY.—Activities carried out under subsection
13 (c) shall include information and education programs for
14 patients and health care providers on the benefits and
15 risks of hormone replacement therapy and the role of such
16 therapy in reducing the risk of cardiovascular disease in
17 women.

18 “(e) AUTHORIZATION OF APPROPRIATIONS.—For the
19 purpose of carrying out this section, there are authorized
20 to be appropriated \$140,000,000 for fiscal year 1998, and
21 such sums as may be necessary for each of the fiscal years
22 1999 and 2000. The authorization of appropriations es-
23 tablished in the preceding sentence is in addition to any

- 1 other authorization of appropriation that is available for
- 2 such purpose.”.

