

EXTENSIONS OF REMARKS

IN RECOGNITION OF NATIONAL
MAMMOGRAPHY DAY AND
BREAST CANCER AWARENESS
MONTH

HON. BOB RILEY

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 21, 1997

Mr. RILEY. Mr. Speaker, today, somewhere in this country, a woman has been diagnosed with breast cancer. There's no cure to offer her. There's no known cause to explain her condition. She's just joined a club of over 180,000 women, who have received the same terrible news from their doctor. What's even worse is that she may join another group of over 43,000 women who die from breast cancer every year. And she will likely wonder if there is anything she could have done to stop it.

And the answer is yes—women are not powerless in this fight for their lives. Over 92 percent of breast cancers can be treated with early detection and prompt treatment.

October 17 is National Mammography Day and I am proud to be a cosponsor of House Resolution 235, which recognizes the importance of mammographies in the fight against breast cancer. I want to encourage every woman across this country to become more proactive in the fight against this disease by scheduling mammograms for herself or someone she loves. The most effective way to battle breast cancer is to detect the disease in its earliest stages, when treatment is possible. Through mammogram screening, physicians can discover breast cancer up to 2 years before a woman could through self-examination. Clearly, the sooner the disease is diagnosed, the better the chance a woman has to survive.

This is an issue that's obviously important to every woman in this Nation. However, it's an issue that should be crucial to America as a whole. I've been blessed through the women in my life. I have a wonderful wife, three lovely daughters, a great daughter-in-law, and the prettiest little granddaughter any one has ever seen. It scares me to know that 1 out of 9 women in America will be diagnosed with breast cancer in their lifetime. Out of these five ladies in my life, there is a chance one of them will one day become a member of the 180,000 women diagnosed with breast cancer.

So, today I call on all Americans, both men and women, to focus more attention on this deadly disease and to become more active in the fight against it. After all, virtually everyone has a mother or a sister, a wife or a daughter that he or she loves and depends on. Women are too important, too precious to this Nation for any of us to ignore one of their most recurrent killers. I know all the women in my life are to me.

TRIBUTE TO TERRY M. RYAN

HON. BILL PASCRELL, JR.

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 21, 1997

Mr. PASCRELL. Mr. Speaker, I would like to call to your attention Terry M. Ryan of Little Falls, NJ, as he is very deservedly honored this evening by Wayne General Hospital.

Terry is president of Hanson & Ryan, Inc. in Totowa, NJ. He joined the agency in 1970 and is responsible for oversight of all agency operations. Terry also serves as president of Financial Services subsidiary, T.M. Ryan Financial Services, Inc. Hanson & Ryan, Inc. has been listed in Business News of New Jersey as one of the "Top 50 Insurance Brokers."

Terry attended Syracuse University and graduated from the College of Insurance with a degree in insurance and risk management.

Active in the industry throughout his career, Terry was a founder of the IANJ [Independent Insurance Agents of New Jersey] Young Agents Committee and served as its first chairman in 1974. He served IAA [Independent Insurance Agents of America] as regional director of the National YAC [Young Agents Committee] for 3 years. Terry has been a member of the Agents Advisory Council for Aetna Casualty & Surety and served as chairman. He has also been the New Jersey representative to the GPC council for Aetna and has served on GRE Insurance Group Advisory Council.

Terry has served on the executive committee of the IIAPC [Independent Insurance Agents of Passaic County]. He has received the New Jersey Department of Insurance Meritorious Service Award and IANJ's Young Agent of the Year Award.

Terry is chairman of the Insurance Committee for the Township of Little Falls and very notably is currently chairman of the Board of Wayne General Hospital. He has been active in many additional community organizations and received citations for his work in those areas. Among those organizations, he has served as a youth sports coaching program honorary trustee of the Passaic County 200 Club of which he was cofounder.

An active member of his community, Terry is currently a member of the board of directors of the Passaic Valley Rotary Club, the National Notary Association, the Little Falls Athletic Club, and an associate member of the Passaic Police Chief's Association. He is a past member of the board of directors, Passaic Valley Kiwanis, the Hamilton Club of Paterson, vice-president-elect and board member of the Passaic Valley Chamber of Commerce, board member of the American Cancer Society—Passaic County chapter, and a member of the board of directors for the Passaic County Historical Society.

Terry resides in Little Falls with his wife, Debbie and three children, Sean, Carrie, and Kristin.

Mr. Speaker, I ask that you join me, our colleagues, Terry's family, friends, and col-

leagues, and the Township of Little Falls in recognizing Terry M. Ryan's many outstanding and invaluable contributions to the community.

A CALL FOR PRODUCT LIABILITY
REFORM

HON. WILLIAM M. THOMAS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 21, 1997

Mr. THOMAS. Mr. Speaker, I rise to address an issue that may soon have severe implications for our health industry. Within the next year there may be a shortage of critical medical devices on the market due to the unavailability of biomaterials. Biomaterials, such as teflon, polyurethane, and polyester yarn, are necessary components in medical devices, for hip and knee implants, pacemakers, and catheters. What makes these biomaterials special is that their biological nature will not be rejected by the immune system. Their chemical properties are specialized to fit the durability and the malleability that is needed in constructing implants, like the tiny cochlear ear implant which enhances hearing.

What has caused this short supply of biomaterials? Biomaterials suppliers are leaving the market of medical devices because of an onslaught of litigation. The suppliers of biomaterials have rarely been found liable for defects in the manufacture of a medical device. The reason is that the biomaterial seldom has anything to do with defect of the product. With so many victories, why would the biomaterials makers continue to face litigation threats? Why do plaintiffs and trial lawyers pursue innocent, though hapless, suppliers of biomaterials? Because they can. In the United States, anyone willing to pay a court filing fee can bring a lawsuit for any reason and pursue it through actual trial even with no hope of success. And while manufacturers of medical devices are relatively small and go bankrupt when forced to pay large litigation settlements, suppliers of biomaterials have deep pockets and thereby attract the voracious appetites of the major trial lawyers.

Thus, biomaterial suppliers, most of which are companies that sell a small percentage of its overall production to medical device manufacturers, are subject to litigation for products that it had no say or responsibility. Biomaterial suppliers are being litigated against for simply supplying the raw materials.

One example of the problem with litigation reaching too far in the biomaterials industry involves DuPont, a maker of synthetic materials. DuPont sold teflon to a manufacturer that made temporo mandibular joint implants. The manufacturer was sued on the grounds of tort law, where the plaintiff believed that the implant was defective. The manufacturer went bankrupt so the plaintiff held DuPont liable for the defective implant. With only about 5 cents' worth of teflon in each mandibular joint implant, DuPont was named in over 250 different

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Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.

cases. DuPont won every case. However, the litigation cost was almost \$50 million over 8 years. Result: DuPont left the medical device market after it decided, without too much difficulty, that its sales for 5 cents of teflon resulted in millions of dollars in legal expenses.

Do we hold steel mills responsible for the criminal use of a gun? Do we hold makers of car paint liable for every auto accident? The law does not, Juries do not. This Congress should not. As the chairman of the Health Subcommittee on Ways and Means, I fear this trend. In a time of rising health care costs, we can ill afford to lose the technologies that have helped patients live their lives with better quality and care. A shortage of raw materials for medical devices and implants will only raise health costs and limit access to the few. In the ongoing process of trying to provide more accessible health care at costs sustainable to our Nation's future, present product liability laws has the potential of running a lot of biomedical suppliers out of the medical device market, even though many of them are completely without fault with regards to the design and manufacture of defective implants.

It would be wise to look at recent health care history for a perspective. Just 40 years ago, children who were afflicted with hydrocephalus—water in the brain—died of brain damage in early childhood. With a device called an implantable shunt, doctors are now able to save these children by relieving the fluid pressure. Before pacemakers were created, heart attack victims would not have survived without something pacing the beat of their heart. Technology has now allowed us to achieve this. We can manufacture knee implants that allow crippled people to walk again. We now have hip and jaw implants. Our technology has been pushed forward with ambitious thinkers, courageous entrepreneurs, and a public with increasing demand for quality in their lives. In the end, every American benefits from these advances in medical technology. More than 75 percent of biomaterial suppliers have already left the medical device implant market. In responding to the influence that made them leave the market, 100 percent of the suppliers cited the fear of litigation costs.

The medical device industry has almost \$50 billion in annual domestic sales, with almost an additional 120 billion dollars' worth of sales in the foreign market. Because nearly a third of all medical device companies reside in California, a loss of this revenue to the California and U.S. economy would be significant. With the current rate of biomaterial suppliers leaving the market, the medical device companies may be left without the precious biomaterials to make implants and be forced to close their businesses.

The many effects that current product liability law provides for with regards to biomaterials simply illustrates one segment of the detrimental effects of overlitigation on our economy. The biomaterials shortage is only one piece of a much larger puzzle. The problem remains excessive litigation while the solution is comprehensive product liability reform. It is not in the best interests of the American people to cease all litigation on defective or harmful products. However, we must provide an environment where consumers can be protected from bad products, while also limiting senseless litigation so that businesses can continue to operate, innovate, and provide for the American consumer. Piecemeal reform of cer-

tain industries, while ignoring the problems that excessive litigation is having on other industries, is not the solution. We tried, in 1995, to enact product liability reform but it was vetoed by the President. I ask Congress to enact comprehensive product liability reform.

HONORING KAY KEYSER OF QUAKER CITY, OH

HON. ROBERT W. NEY

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 21, 1997

Mr. NEY. Mr. Speaker, I commend the following article to my colleagues.

Kay Keyser, of Quaker City, OH, has been nominated for Ohio Teacher of the Year by the East Guernsey Local School District. Kay is a seventh and eighth grade teacher at Buckeye Trail Middle School.

Kay has been in education for 24 years. She is very committed to the school and the community. Kay spends her spare time volunteering on activities which will directly benefit her students. Not only is she a volunteer but also a single mother of two which leaves a minimal amount of time for herself.

The finalists for the Ohio Teacher of the Year will be named within the next few weeks. Mr. Speaker, I ask that my colleagues join me in congratulating Kay Keyser on her nomination for Ohio Teacher of the Year. I wish Kay continued success, health and prosperity.

A COMPELLING ARTICLE

HON. NEWT GINGRICH

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 21, 1997

Mr. GINGRICH. Mr. Speaker, today I call attention to a recent editorial in the Washington Post by George F. Will, entitled "Melding in America."

Mr. Will eloquently encourages the Office of Management and Budget [OMB] to add a sixth racial category to the next census form: multiracial. Not only would such a designation be more accurate, it would also represent society's acknowledgment that a child should never be forced to choose between maternal and paternal heritages.

Additionally, creating such a category would serve to diffuse the politics of grievance groups that use membership in a particular race to claim victim status and thus recompensation for wrongs real or imagined. America is a country founded upon the idea of individual rights—not rights determined by one's skin pigmentation.

I encourage all of my colleagues to read Mr. Will's compelling article.

[From the Washington Post, Oct. 5, 1997]

MELDING IN AMERICA

(By George F. Will)

An enormous number of people—perhaps you—are descended, albeit very indirectly, from Charlemagne. And an enormous number are descended from Charlemagne's groom. Trace our pedigree back far enough, you may find that you are an omelet of surprising ingredients.

Booker T. Washington, Frederick Douglass, Jesse Owens and Roy Campanella each

had a white parent. Martin Luther King, Jr. (who had an Irish grandmother and some Indian ancestry), W.E.B. DuBois and Malcolm X had some Caucasian ancestry. The NAACP estimates that 70 percent of those who identify themselves as African American are of mixed racial heritage. And then there is Tiger Woods, who calls himself "Cablinasian"—Caucasian, black, Indian, Asian. Bear such things in mind as the Office of Management and Budget decides whether to make a small but consequential change in the census form.

The 1790 census classified Americans in three categories—free white male, free white female, slave. In 1850 "free colored" was added. Then came mulatto, octoroon and quadroon (one-eighth and one-quarter black). In 1890 Chinese and Japanese were included as distinct races. Today there are five categories—white, black, Asian/Pacific Islander, American Indian/Native Alaskan and other.

Now there is a rapidly spreading belief that the "other" category is unsatisfactory, because it does not contribute to an accurate snapshot of the population, and it offends sensibilities: Why should a child of a white-black marriage be required to identify with one parent, or as an "other"? So OMB is considering adding a sixth category—"multiracial."

This would serve the accuracy of the census in a nation experiencing a rapid surge in interracial marriages, which increased about 550 percent between 1960 and 1990. The number of children in interracial families rose from 500,000 in 1970 to 2 million in 1990. Between 1960 and 1990 the percentage of African American marriages involving a white spouse more than tripled, from 1.7 percent to 6 percent. Sixty-five percent of Japanese-Americans marry someone of another race.

The multiracial category would serve civic health by undermining the obsession with race and ethnicity that fuels identity politics. Such politics proceed on the assumption that individuals are defined by their membership in this or that racial or ethnic group, often a group that cultivates its sense of solidarity by nurturing its grievances. The multiracial category is opposed by many who have a stake in today's racial spoils system, and thus favor maintaining the categories that help Balkanize America.

It is estimated—probably too conservatively—that 10 percent of blacks would check a "multiracial" box on the census form. As more and more people accurately identify themselves as "multiracial," the artificial clarity of identity politics will blur. The more blurring the better, because it will impede application of the principle of categorical representation—the principle that people of a particular group can only be understood, empathized with and represented by members of that group.

Today some native Hawaiians want out of the Asian/Pacific Islander category, and some Indian and native Alaskans do not want the native Hawaiians included in their category. Some Creoles, Americans of Middle Eastern descent (there are 2 million of them), and others want their own categories. Such elbow-throwing prickliness is one consequence of government making membership in distinct grievance-groups advantageous.

Race and ethnicity are not fixed, easily definable scientific categories. The law once regarded the Irish "race" as nonwhite. Today, ethnicity and race can be, to some degree, matters of choice. Many Hispanics regard "Hispanicity" as an attribute of race, others are more inclined to identify themselves as Hispanic when it is not presented as a racial category.

OMB's decision will follow last week's report from the Commission on Immigration