

They do not say anything about marketing, about salespeople and about the multimillion-dollar lobbying company campaign they are foisting upon us.

#### TRIBUTE TO WARDELL YATAGHAN

(Mr. DAVIS of Illinois asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DAVIS of Illinois. Mr. Speaker, I rise today to pay tribute to Wardell Yataghene, a gentleman who recently passed away and was president of the Resident Council of Rockwell Gardens, a public housing development in Chicago and a founder of the Coalition to Save Public Housing.

Wardell, unfortunately, died too soon, but he gave his life as an inspiration and as a light for those who live in public housing. And I think as a testament to him, I want to urge that we continue to support public housing in the United States.

#### JUVENILE DIABETES FOUNDATION CHILDREN'S CONGRESS

(Mr. NETHERCUTT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. NETHERCUTT. Mr. Speaker, today, this week, children from every State in the Union have come to Washington to participate in the Juvenile Diabetes Foundation Children's Congress. As the cochairman of the House Diabetes Caucus, which boasts 265 Members of this body who have dedicated themselves to trying to find a cure for diabetes, it is fitting that we pay tribute to these young people who came here today and participated in a ceremony on the west front of the Capitol to highlight the need to cure diabetes.

This is not only an adult disease, it is a child's disease, a cruel children's disease that affects millions of people in this country. It is necessary, it is appropriate that this Congress devote adequate resources to try to find a cure for disease through research.

So I am happy to join all the other Members of the caucus in saluting the Juvenile Diabetes Foundation and all the children who participated here today.

I am especially proud of Nancy Stockton, the delegate from Cheney, Washington. Nancy is a tribute to her family, her community and all young people with diabetes.

#### CONGRESS MUST PASS COMMON SENSE GUN SAFETY LEGISLATION

(Ms. DELAURO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. DELAURO. Mr. Speaker, last week, in the dead of the night, the Republican leadership responded to the

tragedy in Littleton, Colorado, by trying to weaken gun safety laws. Instead of taking up the bipartisan measures already approved by the other Chamber, the Republican leadership joined with the NRA to kill common-sense gun safety measures and blow holes in the Brady law. Now, we are back to square one.

But I am an optimist, and I believe that this body can do what is right for America. I call on my colleagues to meet us halfway, close the loophole once and for all that allows criminals to arm themselves at gun shows without any background check at all. Let us ensure that handguns are sold with child safety locks so that children do not accidentally hurt themselves or anyone else when they find a weapon at home.

These are mainstream ideas that parents and families in the country want passed. The cost of delay is steep. Thirteen children are killed every day with guns. One hundred thousand guns are brought to schools every year. Let us take up gun legislation that will keep guns in responsible hands.

#### REPUBLICANS WANT TO CUT TAXES, NOT INCREASE THEM

(Mr. CHABOT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CHABOT. Mr. Speaker, the Democrats are arguing among themselves about which taxes they want to raise, about how to come up with additional revenue. Anyone who has any doubt about the truth of this statement need merely consult with statements made by the President, the House minority leader, the gentleman from Missouri (Mr. GEPHARDT), and the minority leader in the other body, TOM DASCHLE.

The President said this past January, while in Buffalo, New York, that he was opposed to giving the surplus back to the American taxpayers who produced it because, "You might not spend it right." The President thinks that the government knows better how to spend our money than the people who earned it.

The House minority leader stated his vision of expanding the Federal education bureaucracy by cutting defense and raising taxes. In fact, he said he would be proud to do it.

And now we have the minority leader in the other body who just this past weekend said that tax increases were on the table. Maybe on the Democrats' table, but they are not on the Republicans' table. In fact, we are debating which taxes to cut.

Let us reduce the taxes on the people of this Nation.

#### REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H.R. 987

Mr. TRAFICANT. Mr. Speaker, I ask unanimous consent that my name be

removed as a cosponsor of the bill H.R. 987.

The SPEAKER pro tempore (Mr. PEASE). Is there objection to the request of the gentleman from Ohio?

There was no objection.

#### COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House a communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,  
HOUSE OF REPRESENTATIVES,  
Washington, DC, June 22, 1999.

Hon. J. DENNIS HASTERT,  
*The Speaker, House of Representatives,*  
*Washington, DC.*

DEAR MR. SPEAKER: Pursuant to the permission granted to Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on June 21, 1999 at 1:21 p.m.

That the Senate passed without amendment H. Con. Res. 105.

With best wishes, I am  
Sincerely,

JEFF TRANDAHL,  
Clerk.

#### ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to the provisions of clause 8, rule XX, the Chair announces that he will postpone further proceedings today on each motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

Such rollcall votes, if postponed, will be taken later today.

#### EXPRESSING SENSE OF HOUSE REGARDING IMPORTANCE OF RAISING PUBLIC AWARENESS OF PROSTATE CANCER

Mr. BILIRAKIS. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 211) expressing the sense of the House of Representatives regarding the importance of raising public awareness of prostate cancer, and of regular testing and examinations in the fight against prostate cancer.

The Clerk read as follows:

H. RES. 211

Whereas nearly 180,000 men will be diagnosed with prostate cancer in 1999, and an estimated 37,000 men will die of the disease;

Whereas prostate cancer is the second most common form of cancer among men and the second leading cause of cancer death among men;

Whereas prostate cancer can often be treated successfully if detected early on, although most symptoms are nonspecific and there are few reliable risk factors;

Whereas education and regular testing and examinations are critical to detecting and treating prostate cancer in a timely manner;

Whereas the American Cancer Society recommends that all men aged 50 and over have annual examinations and tests for prostate

cancer, and that African American men and men with family histories of prostate cancer, who are at higher risk for the disease, should consider taking such steps at an earlier age:

Whereas the House of Representatives as an institution, and Members of Congress as individuals, are in unique positions to help raise public awareness about the detection and treatment of prostate cancer and to support the fight against prostate cancer: Now, therefore, be it

*Resolved*, That it is the sense of the House of Representatives that—

(1) all American men should take an active role in the fight against prostate cancer by all the means that are available to them, including regular testing and medical examinations;

(2) the role played by national and community organizations and health care providers in promoting awareness of the importance of regular examinations and testing for prostate cancer, and in providing related information, support, and access to services, should be recognized and applauded;

(3) the Federal Government has a responsibility to—

(A) endeavor to raise awareness about the importance of the early detection of, and proper treatment for, prostate cancer;

(B) continue to fund research so that the causes of, and improved treatment for, prostate cancer may be discovered; and

(C) continue to consider ways to improve access to, and the quality of, health care services for detecting and treating prostate cancer.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Florida (Mr. BILIRAKIS).

#### GENERAL LEAVE

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the legislation under consideration, H. Res. 211, and to insert extraneous material in the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

Mr. BILIRAKIS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise, of course, in support of H. Res. 211, a resolution to raise public awareness of prostate cancer and convey the importance of regular testing and examinations to fight this terrible disease. I am proud to be an original cosponsor, and certainly it is very fitting that we all pay tribute to the gentleman from New Hampshire (Mr. BASS), who has worked so very hard on this legislation and was able to keep pushing it so we could get it to this particular point.

According to the National Institutes of Health, prostate cancer is the most frequently diagnosed non-skin cancer in American men. The National Cancer Institute reports that over 200,000 new cases of prostate cancer were diagnosed in the United States in 1997 alone. Tragically, approximately 40,000 men will die of the disease this year.

Since testing for early detection of prostate cancer became relatively com-

mon, the prostate cancer death rate has declined. However, too many lives are still lost to this disease because it is not detected early enough or because treatment is received too late. It is critical, critical that American men use all available means to fight prostate cancer, including regular testing and medical examinations.

The resolution before us today encourages men to be active in the battle against prostate cancer. It also encourages national and community organizations, along with health care providers, to promote the importance of medical examinations and testing.

In addition, this resolution emphasizes the Federal Government's responsibility to provide the necessary resources to fund research to determine the causes of and treatments for prostate cancer.

As chairman of the Subcommittee on Health and Environment of the Committee on Commerce, I have been a strong supporter, as have so very many others, of increasing the Federal Government's commitment to biomedical research. In particular, I have endorsed the proposal to double Federal funding for the NIH over 5 years.

In an effort to provide additional funding for NIH research efforts, I have introduced H.R. 785, the Biomedical Research Assistance Voluntary Option, or BRAVO, as we call it, Act. My bill would allow taxpayers to designate a portion of any Federal income tax refund to support biomedical research to the National Institutes of Health.

Mr. Speaker, we all know that the war against cancer is far from over. Today, the House of Representatives can play a supportive role in the fight against prostate cancer by increasing public awareness about the importance of early detection and treatment of prostate cancer. I urge all my colleagues to support H. Res. 211.

Mr. Speaker, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield myself such time as I may consume.

The resolution we are considering today is important, and we are pleased to cooperate with the majority's request to discharge it from the Committee on Commerce on an expedited basis. We hope and expect that our colleagues on the other side of the aisle will extend the same consideration for issues that we hold important. Our goal must be to work in a timely manner and on a bipartisan basis so that beneficial initiatives can move through this Congress.

One out of ten men will develop prostate cancer in their lifetime. One out of ten. Forty thousand men will die from it each year. Early detection is critical, and raising awareness about the disease is the best way to promote regular testing.

This resolution says we can play a unique role in our districts and through this Congress on the national level also through national exposure to

raise public awareness about prostate cancer.

In 1994, I founded the Northeast Ohio Breast and Prostate Cancer Task Force to help organize efforts at the local level to combat these cancers. Last Sunday, at Jacobs Field in Cleveland, I had the honor of presenting an award to the Cleveland Indians' Mike Hargrove and Jim Thome on behalf of the team for their support for prostate cancer research. This award is part of the Association for the Cure of Cancer of the Prostate and Major League Baseball's 1999 Home Run Challenge. During Father's Day Week, June 20 to 25, every home run hit in 60 selected games will raise money directed towards prostate cancer research.

This resolution today, Mr. Speaker, is a statement of the need to do more to fight prostate cancer and to help men who have this illness. But this Congress can and should do much more. We should pass the Patients' Bill of Rights, which would protect prostate cancer patients from arbitrary coverage denials and ensure their access to the right specialists and to clinical trials.

We should be aggressive in bringing down the cost of prescription drugs and pass the Prescription Drugs Fairness Act. Drug company markups place barriers in the way of life-saving medicine.

And we should move quickly to pass the Breast and Cervical Cancer Act.

We should follow through, Mr. Speaker, with initiatives that help prevent and treat prostate cancer and other illnesses that take such a tremendous toll on our families and on our Nation.

Mr. Speaker, I reserve the balance of my time.

Mr. BILIRAKIS. Mr. Speaker, I yield such time as he may consume to the gentleman from New Hampshire (Mr. BASS), the sponsor of this legislation.

Mr. BASS. Mr. Speaker, I thank the gentleman for yielding me this time, and I rise in strong support of the prostate cancer awareness resolution.

I wish to thank the minority for allowing this to be expedited through the committee process, and as I said a minute ago, I thank the gentleman from Virginia (Mr. BLILEY) and the gentleman from Florida (Mr. BILIRAKIS), as well as the majority leader, the gentleman from Texas (Mr. ARMEY), and the rest of the House leadership. This is a very important resolution to not only myself, but many hundreds of thousands of other men around the country who may be affected by prostate cancer.

Now, last week during National Men's Health Week, which concluded on Father's Day, there was a lot of discussion about the most serious of health issues facing men, and one of them at least is prostate cancer.

□ 1430

This year 180,000 men will be diagnosed with prostate cancer; and, as the gentleman from Florida (Mr. BILIRAKIS) mentioned, 40,000 will die of the disease.

Prostate cancer, in fact, is the second leading cause of cancer among men, second only to skin cancer; and it is the second leading cause of cancer death among men. This cancer can often be treated successfully if it is detected early, but most symptoms are nonspecific and there are very few reliable risk factors. Therefore, two of the most important weapons against prostate cancer are education and timely testing.

The American Cancer Society recommends that men 50 or over talk with their health care professionals about having annual exams and tests for prostate cancer and that African-American men and men with family histories of prostate cancer, who are at higher risk for the disease, should consider taking steps at an earlier age.

This House, as an institution, and we, as Members of Congress, are in unique positions to support efforts against prostate cancer. This resolution expresses the sense of the House that, firstly, all men should take an active role in the fight against prostate cancer and by all the means that are available to them; secondly, that the role of national and community organizations and health care providers in promoting awareness of prostate cancer and in providing related information, support, and access to services should be recognized and applauded; and lastly, that the Federal Government has the responsibility to continue to raise awareness, fund research, and consider ways to improve access to and the quality of services for detecting and treating prostate cancer.

I hope that all of my colleagues will join me today in supporting this resolution, working in our districts to get out the word, not only on Father's Day but every day, that prostate cancer is a killer. We need to educate. We need to talk to our doctors. Timely treatment is what counts.

I urge support and adoption of this resolution.

Mr. Speaker, I yield back the balance of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield 3 minutes to the gentlewoman from California (Ms. Eshoo) who has been a real leader in the fight against breast and prostate cancer on the Subcommittee on Health and the Environment.

Ms. ESHOO. Mr. Speaker, I thank my colleague and good friend from Ohio (Mr. BROWN) for yielding me the time.

I want to first of all rise in support of this very important resolution and the intent that it carries. I would like to pay tribute to my colleague the gentleman from New Hampshire (Mr. BASS) and certainly the gentleman from Florida (Mr. BILIRAKIS) our subcommittee chairman, who are great supporters of this very good thing. So I want to salute them for that and thank them for bringing this resolution to the floor.

After all, who amongst us can be opposed to something like this? We know

the toll that cancer takes on the American people, most specifically, with men in this country.

Yesterday we celebrated a magnificent holiday for our Nation's fathers. I certainly missed mine, who went to heaven about a year and a half ago. And as we bring this resolution to the floor around Father's Day, I also want to rise to speak about an issue that is important to mothers, fathers, families across this country; and that is breast and cervical cancer.

When the gentleman from New York (Mr. LAZIO) and myself introduced a bill in the House, the Breast and Cervical Cancer Act, we made a pledge at that press conference that by Mother's Day our goal was to secure the majority of the House of Representatives in support of that legislation. Well, we not only did that. Mother's Day came and went. It passed. We now have 250 cosponsors from both sides of the aisle in support of this bill.

I think it is very important that the House Committee on Commerce take this bill up in a hearing so that it can be examined. Because the majority of the members of the committee are cosponsors, including the gentleman from New Hampshire (Mr. BASS) and the gentleman from Florida (Mr. BILIRAKIS) our subcommittee chairman.

Now, why this bill? In 1999, the House of Representatives passed a very important and good piece of legislation. That piece of legislation directed the Center for Disease Control, the CDC, to conduct early screening for breast and cervical cancer. It has been a very successful program, but it stopped short of something. And that is, when detection takes place and cancer is discovered either in the cervix or the breast, we now say to American women they are on their own for treatment.

This great Nation can do better than this. And so, the legislation moves beyond where we are now. It offers a carrot to the States where we offer more money in Medicaid for under-insured and uninsured women. We all have these constituents amongst us. We have heard their eloquent testimonies, very sad testimonies, too many of us.

And so, I urge that all of the members of the House Committee on Commerce, most specifically our leadership, to schedule a hearing on this bill so that we can move forward and also to a markup. I think it is an important step for the women and the families of our Nation. By next Mother's Day, hopefully, we will have this legislation in law.

Mr. BILIRAKIS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, more than anything else, I would like to say to the gentlewoman from California (Ms. Eshoo), through the Chair, that if her ears were ringing yesterday, it was because she was the subject of fairly lengthy conversations at the CDC in Atlanta, where the gentleman from Ohio (Mr. BROWN) and I and a number of staff members attended. Part of the discus-

sion was involving the situation that she is trying to solve, and we asked a number of questions in that regard.

As I have told the gentlewoman previously, I am committed to at least holding a hearing on this legislation in the very near future and, hopefully, get it on its way.

Insofar as the managed care problem, which the gentleman from Ohio (Mr. BROWN) mentioned, the Patients Protection Act is moving. We are applying due diligence to the situation. I might add that the problem in managed care is not a new problem, it is a problem that existed for many, many years. And it is this particular Congress, along with the prior Congress, which is trying to solve the issue.

Mr. Speaker, I yield such time as she may consume to the gentlewoman from New York (Mrs. KELLY).

Mrs. KELLY. Mr. Speaker, I rise today in support of the prostate cancer awareness resolution and the Breast and Cervical Cancer Treatment Act.

I commend my colleague from New Hampshire for bringing awareness to the fight against prostate cancer. Thirty-seven thousand men will die from prostate cancer this year, 2,400 in my State of New York alone. I applaud the efforts of the community organizations and health care providers in promoting awareness of and access to regular exams and testing. But, unfortunately, awareness is only half the battle. Once a cancer is diagnosed, it is perhaps even more cruel if it must go untreated. Yet this is a situation that thousands of people have had to face.

Currently, the CDC's National Breast and Cervical Cancer Early Detection Program provides cancer screening services for low-income women who have little or no health insurance. Yet cruelly, after being diagnosed, these women have no means with which to get treatment. The Breast and Cervical Cancer Treatment Act will give States the option to provide Medicaid coverage to these women. While Congress must continue to advocate cancer awareness, it cannot continue to promote screening and early detection without providing a means for treatment.

I urge the leadership and Members of the Committee on Commerce to take action on the Breast and Cervical Cancer Treatment Act and for the House to pass the prostate cancer awareness resolution.

Mr. BROWN of Ohio. Mr. Speaker, I yield 3 minutes to the gentlewoman from California (Mrs. CAPPS), a nurse and a new member of the Subcommittee on Health and the Environment.

Mrs. CAPPS. Mr. Speaker, I thank my colleague from Ohio for yielding me the time.

Mr. Speaker, I rise in support of this resolution on prostate cancer. But I also want to take a moment to speak on the Breast and Cervical Cancer Treatment Act.

As a nurse, I am very concerned about prostate cancer and I am glad

that we are raising awareness of this serious disease which kills approximately 40,000 men a year in this country. I thank the chair and the leadership of our Subcommittee on Health and the Environment the gentleman from Florida (Mr. BILIRAKIS) for introducing this resolution, which I wholeheartedly support. Yet, I am very disappointed that the Committee on Commerce has yet to address the Breast and Cervical Treatment Act.

This bill, introduced by my colleagues the gentlewoman from California (Ms. ESHOO) and the gentleman from New York (Mr. LAZIO), currently has 250 sponsors. The majority of the House of Representatives support the enactment of this treatment bill. And yet we see no plans for floor action in sight.

Here to my right on the screen my colleagues will see the list of agencies and groups, strong groups in this country, health groups, who support this legislation being enacted. These are our constituents across the country. They want us to move ahead on this legislation, and we need to pay heed to their strong recommendation.

The Breast and Cervical Cancer Treatment Act gives States the option to provide Medicaid coverage to uninsured or under-insured women who have already been diagnosed through our National Breast and Cervical Cancer Early Detection Program. But once they have this wrenching diagnosis, they have nowhere to turn for treatment. All the screening in the world will not help if women who are diagnosed with this disease do not have access to quality treatment for their condition.

Just a few minutes ago, I was visited in my offices here by a dozen or so representatives of the AAUW, the American Association of University Women, who are here on the Hill today talking about their issues. And my group was here from Atascadero in San Luis Obispo County.

I told them what I was going to be speaking about on the floor, and they said, yes, we have friends, we have people in our community for whom this fact is a reality, women diagnosed with no place to turn for treatment.

With 250 bipartisan cosponsors of the Breast and Cervical Cancer Act, we need in this House to take action now. We have a chance today to help millions of men with prostate cancer. I support this opportunity and thank our House for taking the lead here to do this.

Let us also take the opportunity to do more than resolve, to actually help survivors of breast and cervical cancer, as well.

Mr. BILIRAKIS. Mr. Speaker, I yield 3 minutes to the gentlewoman from Maryland (Mrs. MORELLA).

Mrs. MORELLA. Mr. Speaker, I thank the gentleman for yielding me the time.

Mr. Speaker, I rise in strong support of H.Res. 211, to raise public awareness

of prostate cancer. I want to thank the gentleman from New Hampshire (Mr. BASS) the introducer of this resolution. I am an original cosponsor of this legislation.

Prostate cancer is the most common type of cancer in men. One out of every five men will develop prostate cancer at some point during his life. As a matter of fact, I have two brothers who have prostate cancer. And there are many parallels between prostate cancer in men and breast cancer in women. Like breast cancer in women, the risk of having prostate cancer increases with age.

The American Cancer Society estimates that nearly 180,000 new cases of prostate cancer and 175,000 new cases of breast cancer will be diagnosed in 1999. Prostate cancer kills about 37,000 men each year, and breast cancer kills over 46,000 women. Prostate cancer is the second leading cause of cancer death in men, and breast cancer is the second leading cause of cancer death in women after lung cancer.

Recently, I attended the opening of an expanded Department of Defense Prostate Cancer Research Center in Rockville, Maryland. This research facility will work in conjunction with the National Institutes of Health in nearby Bethesda, Maryland. I am proud that this premier research corridor looking into the prevention, early detection, and cure for prostate cancer is in my congressional district.

I want to take a moment also to highlight another important piece of legislation, the Breast and Cervical Cancer Treatment Act, H.R. 1070. This bill would amend the Social Security Act to give States the option of expanding medical assistance coverage to include women screened and found to have breast or cervical cancer. It has over 249 cosponsors. Yet, we have not had any further action scheduled on this important legislation.

I agree with the men's prostate cancer support group called, "Us Too!" I must say, I am also part of a support group calling for consideration both in committee and on the House Floor for H.R. 1070, we could say, "H.R. 1070, too!"

I reiterate my support for H.Res. 211. And I compliment again my colleague the gentleman from New Hampshire (Mr. BASS) for his leadership and the gentleman from Florida (Mr. BILIRAKIS) the subcommittee chairman for bringing this bill on the floor today.

□ 1445

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentleman from California (Mr. LANTOS).

Mr. LANTOS. Mr. Speaker, I want to thank my colleague for yielding me this time.

I rise to congratulate and commend all of my colleagues on both sides of the aisle who have played a leadership role on this issue. But I would like to go beyond commending them, to commend three individuals who have done

extraordinarily important things on behalf of this cause of fighting prostate cancer: General Schwarzkopf, the hero of the Persian Gulf War, Senator Bob Dole, and philanthropist Michael Milken. Mr. Milken, through his Cap Cure Foundation, has devoted untold resources and unimaginable energy to dealing with prostate cancer, and I am proud to publicly recognize his significant contribution.

I would also like to associate myself with the comments of my colleagues from California (Ms. ESCHOO and Ms. CAPPS) who talked of breast and cervical cancer problems. As we deal with prostate cancer, I think we have a moral obligation to deal with the issue of breast and cervical cancer.

I call on all of my colleagues on a bipartisan basis to deal with both of these critical health issues affecting millions of American families.

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. DAVIS).

(Mr. DAVIS of Illinois asked and was given permission to revise and extend his remarks.)

Mr. DAVIS of Illinois. I want to thank the gentleman for yielding me this time.

Mr. Speaker, I rise today in support of this resolution, which is designed to raise public awareness of prostate cancer. Prevention, access to health care, awareness, early detection, all of these are ingredients which help save lives.

Prostate cancer is the second leading cause of death among American men, causing over 39,000 deaths a year. Unfortunately for African American men, prostate cancer rates are the highest in the world. In the last 5 years, the death rate for prostate cancer has more than doubled the death rate of breast cancer, which is extremely high and must be acted upon immediately. Unfortunately for African American males, this is one of the most deadly diseases in the world.

I want to take this opportunity to thank those churches, community organizations and other groups in my district who have been promoting awareness by putting into their Sunday bulletins messages about men getting checkups and physicals and going to the doctor.

My father is 88 years old, recently diagnosed a few years ago with prostate cancer, but is a survivor and is alive because of the early detection.

Mr. Speaker, I urge that we support these two measures.

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentleman from Ohio (Mr. TRAFICANT).

(Mr. TRAFICANT asked and was given permission to revise and extend his remarks.)

Mr. TRAFICANT. Mr. Speaker, if you reach age 40, the statistics in America are quite clear. You will live to be a wise senior citizen if you can avoid the two big takers of life, heart attack and cancer. We fund many issues. Some of them are highly sensationalized, with

much press and hype. But I say it is time to wage an all-out war on cancer. It is overdue, and it must, in fact, involve all our efforts.

I want to applaud the efforts of the gentleman from Florida (Mr. BILIRAKIS) here today, one of the fine chairmen in the House. His heart is in the right place. He has worked very hard on this. I want to compliment the distinguished gentleman from New Hampshire (Mr. BASS) for his leadership, and I want to compliment my neighbor, the gentleman from Ohio (Mr. BROWN), for his work on health-related issues.

I would also like to advise the Congress to support and work with the efforts of the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Ohio (Mr. BROWN). The health-related issues facing this Congress are some of the most important issues facing the American people. I urge an "aye" vote.

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that the gentleman from Pennsylvania (Mr. PITTS) be permitted to control the remainder of my time for consideration of this legislation.

The SPEAKER pro tempore (Mr. PEASE). Is there objection to the request of the gentleman from Florida?

There was no objection.

Mr. BROWN of Ohio. Mr. Speaker, I yield 1 minute to the gentleman from Indiana (Mr. HILL).

Mr. HILL of Indiana. I thank the gentleman from Ohio for yielding me this time.

Mr. Speaker, I also rise in support of this resolution. Prostate cancer comes in four stages. Approximately 6 years ago, my then 51-year-old brother went to the doctor because he was having problems. He found that he was in stage four of prostate cancer. Still we did not give up hope. Still we prayed a lot, held hands a lot, talked a lot. But in the final end, he did not make it, and he died. He died a very horrible and agonizing death. I will never forget it as long as I live. It has affected me dramatically.

I hope my brother's pain and suffering does not go in vain, because today I have the opportunity to evoke his name and support this resolution, and hopefully all that pain and suffering, if we can save at least one life in America through this resolution or through this speech, if we can just save one life in America because of this resolution today, the meaninglessness and pointlessness of his pain and suffering will not go in vain.

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentlewoman from Texas Ms. JACKSON-LEE.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I thank the gentleman from Ohio for yielding me this time.

I thank the gentleman from New Hampshire (Mr. BASS) and the gentleman from Florida (Mr. BILIRAKIS) for their leadership and the gentleman from Ohio (Mr. BROWN) for his leadership.

I am not a member of the committee of jurisdiction, but I come to the floor with a personal commentary to support the passage of this resolution dealing with prostate cancer and the enhanced opportunities to educate the American public and men about the dangers and the devastation of prostate cancer. I lost my father 3 years ago to prostate cancer. I will always be reminded of the fact that his life was shortened because of lack of early detection and education about this devastating disease.

There are an estimated 179,300 new cases of prostate cancer this year, and prostate cancer rates for African American men are significantly higher than the rates for white men. African American men have higher incidences of prostate cancer than any other ethnic group in the world since the disease is rare in Asia, Africa and South America.

The incidence of prostate cancer increases as men age. More than 75 percent of all prostate cancers are diagnosed in men over 65. Men over age 50 should have tests done every year. And, of course, African American men should be tested at an even earlier age.

I serve on M.D. Anderson Hospital's prostate cancer advisory committee, and I would say that the best celebration and commemoration we could give to our fathers across the land no matter what their ethnic background is to encourage them to get early testing and to not be afraid to go to the doctors.

I also support the passage, if you will, of the Breast and Cervical Cancer Treatment Act. I believe that as we fight the deadly disease of cancer, there can be no excessive amount of legislation that deals with these devastating diseases. I would offer my support for the resolution dealing with prostate cancer. I would ask all my colleagues to heartily support us in our fight to end this deadly disease.

Mr. Speaker, I stand here today with the men of this House to urge public awareness of prostate cancer. Prostate cancer is the second most common form of cancer and the second leading cause of cancer death. Education and regular testing are crucial to survival because prostate cancer can be treated successfully if it is found early.

I support this resolution today because it expresses our sense that public awareness, regular testing, early detection and treatment are critical to survival.

There are an estimated 179,300 new cases of prostate cancer this year. Prostate cancer rates for African American men are significantly higher than the rates for white men. African American men have higher incidences of prostate cancer than any other ethnic group in the world since this disease is rare in Asia, Africa and South America. My father who I loved dearly, Ezra Jackson, died three years ago from prostate cancer. My uncle died of the disease as well. We should be diligent in helping all men to learn about the disease and get early testing. This resolution will help some live.

The incidence of prostate cancer increases as men age—more than 75% of all prostate

cancers are diagnosed in men over 65. Thus, it is crucial for men to have regular checkups for early detection. Men over age 50 should have tests done every year. African American men should be tested at an even earlier age.

The federal government has an important role to play in raising public awareness about this disease. We must continue to support research and treatment efforts to improve the chances of survival for men diagnosed with prostate cancer. We should also encourage more efforts to improve access to care for men, particularly low-income, traditionally underserved patients.

I support these efforts to battle this deadly disease. Prostate cancer will kill 37,000 American men this year. I hope that through the collective resources of the federal government, local and community health services, and through public awareness and education, we can one day refer to this disease in the past tense. Finally, Mr. Speaker I hope we will also move to the floor H.R. 1070, the Breast and Cervical Cancer Treatment Act—which will also help to save lives—the many women who have or will suffer from this dreadful disease.

**New Cases:** An estimated 179,300 new cases in the US during 1999. Prostate cancer incidence rates remain significantly higher in African-American men than in white men. Between 1989 and 1992, prostate cancer incidence rates increased dramatically, probably due to earlier diagnosis in men without any symptoms, by increased use of prostate-specific antigen (PSA) blood test screenings. Between 1993 and 1995, prostate cancer incidence rates declined, primarily among white men.

**Deaths:** An estimated 37,000 deaths in 1999, the second leading cause of cancer death in men. During 1991-1995, prostate cancer mortality rates declined significantly (-1.6% per year). Like the decreasing trends in incidence, the trends in mortality occurred primarily among white men. Mortality rates in African-American men remain more than twice as high as rates in white men.

**Signs and Symptoms:** Weak or interrupted urine flow; inability to urinate, or difficulty starting or stopping the urine flow; the need to urinate frequently, especially at night; blood in the urine; pain or burning on urination; continuing pain in lower back, pelvis, or upper thighs. Most of these symptoms are nonspecific and may be similar to those caused by benign conditions such as infection or prostate enlargement.

**Risk Factors:** The incidence of prostate cancer increases with age; more than 75% of all prostate cancers are diagnosed in men over age 65. African Americans have the highest prostate cancer incidence rates in the world; the disease is common in North America and Northwestern Europe and is rare in Asia, Africa, and South America. Recent genetic studies suggest that an inherited predisposition may be responsible for 5%-10% of prostate cancers. International studies suggest that dietary fat may also be a factor.

**Early Detection:** Men age 50 and older who have at least a 10-year life expectancy should talk with their health care professional about having a digital rectal exam of the prostate gland and a prostate-specific antigen (PSA) blood test every year. Men who are at high risk for prostate cancer (African Americans or men who have a history of prostate cancer in close family members) should consider beginning these tests at an earlier age.

**Treatment:** Depending on age, stage of the cancer, and other medical conditions of the patient, surgery and radiation should be discussed with the patient's physicians. Hormones and chemotherapy or combinations of

these options might be considered for metastatic disease. Hormone treatment may control prostate cancer for long periods by shrinking the size of the tumor, thus relieving pain. Careful observation without immediate active treatment ("watchful waiting") may be appropriate, particularly for older individuals with low-grade and/or early stage tumors.

**Survival:** Sixty percent of all prostate cancers are discovered while still localized; the 5-year relative survival rate for patients whose tumors are diagnosed at this stage is 100%. Over the past 20 years, the survival rate for all stages combined has increased from 67% to 93%. Survival after a diagnosis of prostate cancer continues to decline beyond five years. According to the most recent data, 68% of men diagnosed with prostate cancer survive 10 years and 52% survive 15 years.

Mr. BROWN of Ohio. Mr. Speaker, I yield myself such time as I may consume.

I appreciate the debate today and appreciate the good efforts of the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Pennsylvania (Mr. PITTS) on that side and the gentlewoman from California (Mrs. CAPPS), the gentlewoman from California (Ms. ESHOO), the gentleman from Illinois (Mr. DAVIS), the gentleman from Ohio (Mr. TRAFICANT), the gentleman from Indiana (Mr. HILL), the gentlewoman from Texas (Ms. JACKSON-LEE) and the gentleman from California (Mr. LANTOS) on my side.

I especially ask this House with bipartisan cooperation to pass H. Res. 211 but also move forward on the Prescription Drug Fairness Act, on the Patients' Bill of Rights, and on the Breast and Cervical Cancer Act. If we could accomplish those health care issues this year, this will have been a very successful Congress.

Mr. FRELINGHUYSEN. Mr. Speaker, I rise today in strong support of H. Res. 211, I am proud to be a cosponsor of this resolution which expressed the sense of the Congress regarding the importance of raising public awareness about prostate cancer.

Prostate cancer is one of the most serious health issues facing men. One in five men will develop prostate cancer in his lifetime. According to the National Institutes of Health, this year nearly 185,000 men will be diagnosed with prostate cancer and 39,000 men will die. Prostate cancer is the most common type of cancer among men, and the second leading cause of cancer death in men. The most important thing to know about prostate cancer is that it can be treated successfully if detected early.

As you know, my predecessor, the late Congressman Dean Gallo died of prostate cancer in 1994, having been diagnosed late in his disease. Dean was a fighter for New Jersey but sadly he could not fight prostate cancer successfully. Despite Dean's death his memory lives on in the Dean and Betty Gallo Prostate Cancer Center at the Cancer Institute of New Jersey. Mr. Speaker, New Jersey is 17th among all 50 states in the incidence of prostate cancer and 8th among African Americans.

Congress has declared a war on cancer, in any of its forms, and we must continue to provide the bullets to fight this war in our dedication to raising awareness about cancer, and

the commitment to increase funding for cancer research.

Remember, prostate cancer may kill, but it does not have to. Early detection can save a life. I say to all men, see your doctor for a prostate examination today; take a P.S.A. annually.

Mr. Speaker, I think my good friend from New Hampshire, Mr. BASS, for introducing this important resolution.

Mr. FORBES. Mr. Speaker, I rise in strong support of House Resolution 211, a sense of the Congress on Raising Awareness of Prostate Cancer.

One out of every five men is at lifetime risk for prostate cancer. While about every third male over age 50 probably already has prostate cancer in some form and does not know it; roughly one-quarter of those who are stricken, will get a life-threatening form of the disease.

Prostate cancer is the second leading cause of cancer deaths in men (after lung cancer) and, excluding skin cancer, is the most common cancer in American men. Early prostate cancer often does not cause symptoms, and most people find out about their prostate cancer too late, even though the cancer can be detected in most case with a simple, inexpensive blood test.

While the American Cancer Society and several other groups recommend that every man over age 50 get tested once a year, and General Schwarzkopf, a man who has undergone prostate surgery, said prostate cancer testing saved his life. Society still talks about prostate cancer after the fact rather than talking about the test that could quickly arrest prostate cancer in the early beginning.

The disease touches the lives of millions of men and their families, yet myths and misunderstandings about prostate cancer remain common.

Learning about prostate cancer, who's at risk and how to fight it is a crucial first step in overcoming this problem. The more you know about Prostate Cancer, the better equipped you are to fight it.

We are here today, to end the public embarrassment about prostate cancer and begin the process of making men more aware of what this disease can do and what they must do to protect themselves. Too many men have died because they made the mistake of ignoring the devastating effect of prostate cancer.

Today we can start turning the tide. Support this resolution.

Mr. WAXMAN. Mr. Speaker, I rise in support of this resolution, and commend the chairman of the Subcommittee on Health and the Environment, Mr. BILIRAKIS, and the ranking member, Mr. BROWN, for bringing this resolution before the House today.

No one can doubt the value of increasing public awareness of prostate cancer. Screening and testing can lead to early detection and effective treatment of this all-too-common form of cancer.

But while I strongly support this resolution, I cannot help but note the contrast between our eagerness to act here—even without committee consideration—with the failure of our committee to consider another important piece of legislation, a very reasonable and broadly supported bill to provide the option of Medicaid treatment for low-income women with breast cancer.

I am proud to be one of nearly 250 cosponsors of H.R. 1070. This bill was introduced by

Congressman LAZIO and Congresswoman ESHOO to remedy the inexcusable situation we have now, where we screen low-income women for breast cancer, but then are unable to provide timely treatment when the condition is discovered.

This legislation provides States the option to provide that treatment under Medicaid.

It is a bill that has broad support, both inside and outside the Congress. Yet we have held no hearings on this bill in subcommittee. We have no schedule to mark it up.

If we did act to bring this bill to the House floor, I feel certain it would enjoy the same broad support as the resolution we have before us today.

So while I commend Mr. BILIRAKIS for his efforts on the prostate cancer resolution, I also hope we will soon again be on this House floor discussing the imminent passage of H.R. 1070. The women of America suffering from breast cancer deserve no less.

Mr. ACKERMAN. Mr. Speaker, I rise to express my strong support for H. Res. 211, which underscores our nation's support for prostate cancer research and testing. All too often, men and their families remain silent about this deadly disease, which will claim the lives of an estimated 37,000 individuals this year alone.

It is critical that our nation starts to talk about prostate cancer in order to increase our awareness about early testing and treatment options. We in the Congress took an important step in fighting this condition by providing Medicare coverage for the prostate specific antigen blood test (PSA) and the digital rectal exam (DRE). I, along with a bipartisan group of House members recently urged HCFA to implement coverage for these procedures in the most timely manner possible. By providing this critical coverage, we can save the lives of thousands of men, while saving Medicare a substantial amount of funding.

We can also provide real hope for the 180,000 men who are estimated to be diagnosed with prostate cancer by investing in research. We still have a long way to go before we really understand the risk factors associated with the disease. It is my hope that the National Institutes of Health and other Federal agencies will continue their groundbreaking research into this disease.

I ask all of my colleagues to join me in supporting this important resolution, which clearly states our commitment to treating and eventually curing this terrible disease.

Mr. BROWN of Ohio. Mr. Speaker, I yield back the balance of my time.

Mr. PITTS. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Florida (Mr. BILIRAKIS) that the House suspend the rules and agree to the resolution, House Resolution 211.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.