

started smoking before they were 18. Three thousand teenagers will become regular smokers each day. So when we finish this day, we can count 3,000 more young people that will become smokers. Already this year more than 1 million kids, a million children, have become smokers. Three hundred forty thousand of those kids will die as a result of becoming smokers.

Mr. Speaker, to look at these numbers, one would think we would never be able to win the battle against this dangerous and deadly habit. But I believe that Cynthia Plascencia and her friends are smarter than that. They know smoking not only causes them to have bad breath, stained teeth, and smelly clothes, they know it interferes with them achieving their dreams. They know they will not be able to reach for the stars if they have to be hooked up to a respirator. They know that cancer, heart disease, stroke and asthma will not help them reach their goals. They know they will never meet their athletic goals if they cannot catch their breath. And they know they will not do well in school if they cannot concentrate.

After reading Cynthia's essay, I believe that teenagers today, when armed with the right information, will know better than to start smoking.

We have learned that there are programs that work. Study after study have proven that anti-smoking education campaigns significantly reduce tobacco use among kids. Community-based programs, public education, school-based programs, assistance for smokers who want to quit, enforcement of youth access laws are all important components of an anti-smoking campaign. But most importantly, we must get to the children before they start smoking. We need to work to see that all students, like Cynthia Plascencia, know that it is just not worth it to start smoking.

Cynthia is an example of the culture we must create in our children, where it is not cool to smoke. Because kids see friends, family, and movie stars smoking, they think it is a way to gain social acceptance. If that myth disappears, kids will be less tempted to start smoking.

Everyone must realize that smoking is like crack or heroin, it is addictive and it will take a person's life at a much earlier age.

Mr. Speaker, tomorrow is the Great American Smokeout. Millions of Americans will stop smoking for the day. Let us hope that they take it a step further and give up smoking for life.

UNFINISHED BUSINESS ASSOCIATED WITH SEPTEMBER 11 EVENTS

The SPEAKER pro tempore (Mr. SHIMKUS). Under a previous order of the House, the gentlewoman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I have often risen to this floor

over the last couple of weeks and spoken about the unfinished business of this House, and I again rise to my feet.

Let me, first of all, make a very brief comment about airline security. We had a deal, Mr. Speaker. We had a bill passed by 101 in the other body. We had the opportunity in this House to likewise pass that bill and immediately place it on the President's desk. The Republican majority chose not to do that, causing a conference and causing delay.

In the course of that delay, an individual went into O'Hare Airport with seven knives, a stun gun, and pepper spray. Now, I have legislation that I will be offering that criminalizes the carrying of knives and instruments of danger on airplanes, but I would much rather be passing a comprehensive airline security bill, and I hope we will do that.

I offer that in the spirit of bipartisanship and I offer that in the spirit of the voice of the American people. I have heard their voices, and I think their voices sing the same refrain: Help us protect ourselves and help us protect those who travel the airlines of America and around the world.

I also feel compelled to come to this floor to acknowledge the needs of two young women, Dayna Curry, who celebrated her birthday while incarcerated in an Afghanistan jail, and Heather Mercer, 24, both of them from the State of Texas. Let me thank their Congressperson, the gentleman from Texas (Mr. EDWARDS), for his untiring efforts on their behalf.

I rise today as a mother, as the Chair of the Congressional Children's Caucus, as a woman, to ask whether or not these young ladies have been forgotten along with the other detainees. We now find out that with the Taliban they have been absconded off to the southern part of Afghanistan. We do not know where they are. We are told by Afghanistan detention center guards that they were nice young women; that they were taken away in the dark of night; that we do not know where they are. We believe they may be going off to a southern city.

We understand the conditions they were living in were none to be proud of. There was no four star and five star hotel. We understand that they tried to stay positive by singing songs and praying. We understand that they do not separate from each other. They are two Americans, I think there is a total of eight, and they are united.

We also understand that family members have not been able to talk with them; that they have not been able to meet with outside officials since their lawyers' last visit in late October. Who amongst us, Mr. Speaker, would tolerate that here in the United States or accept that?

These young women cannot be forgotten. And even though there may be some inner workings, some negotiation, I think the voice of the United States should be strong: We want our

hostages returned. We want these young women returned. These young women were not violating any laws other than merciful efforts to help people to have a better life.

The Taliban should be challenged. Yes, they may be running away, the Northern Alliance may be victorious, they may be in Kabul, but we must stand up for these young women. I am looking to the State Department to begin to ask the hard questions about these young women, and I want to join with my colleague, the gentleman from Texas (Mr. EDWARDS), to demand for their release, but also for a voice of the United States, the kind of voice we had with the hostages in Iran.

Let us have a voice as we parallel to fight terrorism and to fight against the Taliban. Have them give our people back and let our voices be loud.

Mr. Speaker, let me briefly thank the gentlewoman from Virginia (Mrs. JO ANN DAVIS) for what she has been doing in acknowledging those who lost their lives on September 11, 2001. As I begin to call their names, and I may not be able to conclude it, but I want to call their names and ask apologies of their families if I mispronounce them:

Harold Lizcano, Martin Lizzul, George Llanes, Elizabeth Claire "Beth" Logler, Catherine Lisa LoGuidice, Jerome Lohez, Michael Lomax, Stephen V. Long, Laura M. Longing, Salvatore Lopes, David Lopez, Maclovio "Joe" Lopez, George Lopez, Manuel "Manny" L. Lopez, Leobarbo Lopez, Daniel Lopez, Israel P. Lopez, Luis M. Lopez, Chet Louie, Stuart Seid Louis, Joseph Lovero, Sara Low, Michael W. Lowe, Garry Lozier, John Peter Lozowsky, Charles Peter Lucania, Edward "Ted" Hobbs Luckett, II, Mark G. Ludvigsen, Lee Charles Ludwig, Sean Thomas Lugano, Daniel Lugo, Jin Lui, Marie Lukas, William Lum, Jr., Michael P. Lunden, Christopher Lunder, Anthony Luparello, Gary Lutnick, Linda Luzzicone, Alexander Lygin, CeeCee Lyles, and Lyn Corea Gray.

They are all people. They lost their lives on September 11, 2001. It is the challenge of this House to pay tribute to them in the works we do and also to bring our hostages home.

TRIBUTE TO BENNY H. POTTER

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WATSON) is recognized for 5 minutes.

Ms. WATSON of California. Mr. Speaker, Veterans Day, a few days ago, was very significant to someone in my district. I want to pay tribute to Benny H. Potter, a resident of the West Adams community in Los Angeles. He lived there for a decade, and was a veteran of the Second World War. He passed away recently. He was greatly loved and respected by all in the community who knew him.

Mr. Benny, or Uncle Benny as he was affectionately called, was born on August 21, 1919, in Albuquerque, New Mexico. His family migrated to Los Angeles in 1925. During World War II, he was assigned to the 10th Cavalry Division, which sent him to North Africa to serve under General George Patton. He later served in Italy and Germany and had the honor of marching in the V-E Day Parade in Paris, France.

Mr. Potter served his country with distinction. His family recently received a letter of commendation from the President of the United States for his distinguished service. He received four decorations for his service: The American Campaign Medal, the European-African-Middle Eastern Campaign Medal, the Good Conduct Medal, and the Victory Medal.

At Mr. Potter's memorial service, four generations of relatives spoke. Two generations still live in the West Adams area. Numerous friends and neighbors saluted him with songs and words of praise, and I promised to give him the flag in his memory that I received after I served as Ambassador to Micronesia because he so well represented our country and our family abroad.

At 81 years of age, Benny Potter was still the neighborhood gardener and handyman. He would bring magazines to elderly neighbors and was always ready with uplifting stories or sage advice for everyday problems. Mr. Potter was also the hub of an informal neighborhood news network. One neighbor described him by saying simply: "He was the best. He was CNN, the Sports Channel, the Weather Bureau, and he was my friend."

On this Veterans Day past, I think we should look back on all the contributions of our veterans, as we will be looking forward on those who have fought in this most recent war in Afghanistan. Veterans like Benny Potter risked their lives to protect our country and their communities. But once back home, his contributions continued.

Benny H. Potter, a man who never met a stranger, leaves a legacy of which we all may be proud, and he made us so much better. He serves as a shining example of the spirit which drove our veterans to serve their communities in both war and peace and the spirit with which many of our young men and women will be coming back from fighting in a country so far away that they really did not know where it was on the map. This is a tribute to that kind of spirit that honors our country and makes us the greatest country in the world.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from North Carolina (Mrs. CLAYTON) is recognized for 5 minutes.

(Mrs. CLAYTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Virginia (Mr. SCOTT) is recognized for 5 minutes.

(Mr. SCOTT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

PEDIATRIC EXCLUSIVITY BILL

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. STUPAK) is recognized for 5 minutes.

Mr. STUPAK. Mr. Speaker, I rise today to urge Members to vote against H.R. 2887, the Pediatric Exclusivity bill, as it will appear on the suspension calendar tomorrow. It has a number of controversial provisions.

First approved in 1997, pediatric exclusivity granted the drug companies an extension of 6 months under patents if they would provide a study to determine if the drug was beneficial to young people. The FDA invites drug companies to do a study on what effect the drug may have on young people. Upon completion of the study, the FDA then grants a pediatric exclusivity to the drug, which the drug companies then use as a marketing tool to promote and increase drug sales.

The grant of pediatric exclusivity takes place after the drug company study is completed, without anyone knowing what the study says about the safety, the effectiveness, or the dosage requirement for young people. There is no requirement to change the labeling on a drug to reflect the changes that may be needed when a drug is dispensed to young people. There is no label to tell doctors, patients, or their families on the proper dosage or on how to dispense or use the drug.

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Before we grant pediatric exclusivity to a drug and before this pediatric exclusivity is marketed as approved for pediatric use, we should know what is the effect of this drug on young people.

Under the bill that will be before us tomorrow, H.R. 2887, after a study is completed, exclusivity is granted; but the results of the study, the results may not be disclosed to the doctors, patients and their families for up to 11 months. The physician, the patient and the family has a right to know about the drug the patient is about to ingest. Why does it take 11 months?

This chart highlights the problems with pediatric exclusivity. There have been 33 drugs granted pediatric exclusivity, and only 20 have been relabeled; and it takes an average of 9 months to do that. The average time from the

granting of pediatric exclusivity is 9 months. For 9 months, doctors, patients and their families have no idea if the child is receiving a proper dosage and if the drug is really safe.

On this chart, exclusivity granted, and below in parentheses was when the label was provided. In Lodine, it took 9 months for them to change the label, and after the label was changed, approximately two times a lower dose recommended. It should have been cut in half. Nobody knew that for 9 months.

Buspar, if Members take a look at it, 2 months after exclusivity is granted, they finally say safety and effectiveness were not established in patients 6 to 17 years old. In other words, it did not do anything. They are marketing it as a drug to help the patient.

How about Fluxvoxamine. Again, exclusivity granted January 3, 2000. Eight months later the label is changed. It says it may require lower dosage, and it gives an age group.

Propofol, exclusivity is granted August 11, 1999; but they did not change the label to let the doctors, patients, and families know until 18 months later. It says here "may result in serious bradycardia." It goes on to say it is not indicated for pediatric ICU sedation, as safety has not been established. That is information doctors need to know.

The worse thing is, the incidence of mortality doubles from 4 percent to 9 percent. That is information we need to know. Doctors, patients, and families should know this information before we grant pediatric exclusivity. My amendment would require not just a study but proper labeling on the drug before it is granted pediatric exclusivity and marketed.

Pediatric exclusivity is the only time that labeling is not a prerequisite to granting a drug approval. Why would we want to endanger our children?

Mr. Speaker, I cannot offer my amendment under the suspension calendar. In order to have an opportunity to offer my amendment to protect the health and safety of our young people in this country, we must defeat the bill under the suspension calendar and send the bill to the Committee on Rules where I will be given an opportunity to offer my amendment.

I do not understand why the majority does not want doctors, patients, and families to know the effect of the drug, what is the effectiveness of the drug, and is the drug safe for our children. Tomorrow I ask Members to defeat the bill under suspension so we can bring it back to the floor.

STRATEGY FOR GLOBAL FIGHT AGAINST TERRORISM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. ANDREWS) is recognized for 5 minutes.

Mr. ANDREWS. Mr. Speaker, I rise today to call for the creation of a new