

EDDIE BERNICE JOHNSON to instruct the House conferees on H.R. 6, The Energy Policy Act of 2003. This motion would strike language in the energy conference draft that would prevent areas of the country from having to bear the economic burden of transported air emissions from other areas.

In 1998 the Environmental Protection Agency (EPA) developed a policy that allowed the EPA to extend the attainment date for moderate or serious ozone non-attainment areas that were affected by transported pollution. That policy was successfully challenged in court in several regions of the country, where courts ruled that the EPA did not have the authority to extend the ozone attainment dates for those areas. The proposal in the energy bill is a good proposal that would simply codify a 5-year old policy designed to prevent an unjust result. I think we can all agree that downwind areas not attaining ozone standards should not be penalized for pollution they do not generate. An area that is "bumped up" to a higher non-attainment classification automatically forces a region into a more stringent and expensive regulatory regimen through no fault of their own.

The codification of the 1998 policy allows the EPA flexibility in remedying this situation but does not let downwind areas off the hook for attainment of the ozone standards. In order to qualify, an area must be a victim of pollution transported from another area that significantly contributes to non-attainment in the downwind area. The EPA must approve a plan that complies with all requirements of the Clean Air Act (CAA) that are currently applicable to the areas, as well as includes any additional measures needed to reach attainment by the date for the upwind area. Finally, the extension of any date must provide for attainment of CAA standards "as expeditiously as practicable" but in no case later than the time in which upwind controls are in place.

In my State of Georgia and, more specifically, the metro Atlanta area, we have been working hard to improve our air quality and I am pleased to report that based upon the last 3 years of air quality data, we are almost in attainment for the 1-hour ozone standard. In fact, one bad air day, at one monitoring station has kept Atlanta from attaining the one-hour standard. As you know to be in compliance, each monitor must not have more than 3 "exceedances" over a 3-year period. The Conyers station reported 4 "exceedances" between 2001 and 2002.

Striking the language in H.R. 6 will roll back years of progress that we have made in the Atlanta region, while at the same time forcing us to adopt a regimen that will only serve to hurt business, commerce, and government through more regulation. The Senate and House energy conferees are working hard to achieve a balanced, long-term energy bill that provides adequate energy supplies at affordable prices. I urge my colleagues to vote against the Eddie Bernice Johnson motion to instruct and to give the EPA the flexibility it needs in implementing its ozone policy.

COMMITTED TO PROGRESS IN FIGHTING BREAST CANCER

HON. RUBEN HINOJOSA

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 30, 2003

Mr. HINOJOSA. Mr. Speaker I rise today to acknowledge the importance of breast cancer awareness. This year in the U.S. alone, more than 200,000 women and men will be diagnosed with breast cancer, and over 40,000 will die from this devastating disease. Every 3 minutes a woman is diagnosed with breast cancer, and every 13 minutes a woman dies from this disease.

We know that early detection of breast cancer saves lives. Mammography screening remains the best tool available to detect breast cancer at its earliest, most treatable stages. The death rate from breast cancer among women in the U.S. has been decreasing by about 2 percent annually during the past decade, suggesting that public awareness, early detection, and improved therapies are having an impact on the disease. In the past 20 years, the percentage of women in the U.S. receiving mammograms has grown from 13 percent to 60 percent—a significant difference. But we still have a long way to go. Mortality rates in some minority populations have not declined at the same rate as it has in other populations, and we must ensure that all Americans, regardless of race or ethnicity, have access to quality breast health and breast cancer care.

We must continue to fund the programs that enable progress in winning the war on breast cancer, prioritize increased NIH funding, move the reauthorization of the Mammography Quality Standards Act through conference intact, and take action on the 10+ pieces of legislation that have been introduced during the 108th Congress to better the lives of breast cancer victims and survivors, fund research and promote awareness. The 72 people that will be diagnosed with breast cancer today are counting on us.

THE DIETARY SUPPLEMENT ACCESS AND AWARENESS ACT

HON. HENRY A. WAXMAN

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 30, 2003

Mr. WAXMAN. Mr. Speaker, today, Representative SUSAN DAVIS, Representative DINGELL, and I are introducing the Dietary Supplement Access and Awareness Act.

Since the passage of the Dietary Supplement Health and Education Act ten years ago, it has become clear that the dietary supplement market includes not just vitamins, minerals, and nutrients that can safely promote health. The market also includes products that can cause harm. Ephedra, for example, is linked to a number of serious adverse events, including heart attack, stroke, and death. Aristolochic acid, which is in some traditional Chinese medicines, can cause kidney failure. Usnic acid, an ingredient in some weight loss supplements, may cause liver toxicity. These safety concerns are serious, and they deserve a serious response.

In the last couple of years, Congress has begun to pay more attention to dietary supplement safety. Senator DURBIN held hearings on ephedra and has introduced comprehensive legislation to ensure that supplements are safe. The House Commerce Committee has also held hearings, and today we are introducing legislation that would enhance FDA's authority to protect consumers from unsafe products. This is a common sense bill that contains many of the same elements as the Durbin bill and responds to concerns raised by consumers, medical groups, parents, and professional and collegiate athletic leagues. They have said it is time to mend the Dietary Supplement Health and Education Act in order to protect consumers from the few dietary supplements—like ephedra—that could pose a real risk to health and safety.

The bill accomplishes this goal in four steps.

First, the bill assures that the Food and Drug Administration has basic information about who makes dietary supplements. If a problem surfaces with a particular product, FDA will know who makes the product and can quickly inspect the plant or take other appropriate action.

Second, the bill assures that FDA receives information about adverse effects associated with supplements. This information will allow the agency to spot signs of danger. The agency can then investigate further. This provision would prevent a repeat of the ephedra disaster, where one manufacturer denied the existence of thousands of adverse event reports for years.

Third, the bill allows FDA to prohibit the sale to minors of supplement products that may cause significant harm. This is a very important power that FDA does not currently have. There are products being targeted to kids for which there is little or no evidence of safety but there is real evidence of risk. Many of these products are sold as performance enhancers and contain ephedra or steroid-like substances.

Fourth, the bill gives FDA the tools to understand whether a potentially risky dietary supplement is dangerous or safe. Imagine a dietary supplement that is linked by physicians to serious illnesses and deaths. Under current law, this product is essentially assumed safe until demonstrated by FDA to be unsafe. This is a burden of proof that literally requires that more and more consumers be seriously injured or killed before the agency can take action. Under our bill, FDA can require that a manufacturer of a product provide evidence of safety if FDA has evidence that the product may pose serious risks to consumers. Most manufacturers say they already have substantiation of safety in their files. If this is true, this requirement should not pose an undue burden on manufacturers.

Let me make one comment about what this bill does not do. This legislation will not in any way affect the regulation of vitamins and minerals. Vitamins and minerals are expressly exempted from this legislation.

If passed, this legislation will address many of the concerns of medical groups, athletic organizations and leagues, and parents while preserving access to low-risk dietary supplements. It is a common sense approach that is urgently needed.

Although this bill does not specifically address stimulants, like ephedra, in dietary supplements, I am very concerned about the risks

associated with these products. These products can raise blood pressure and increase metabolism, which may lead to a number of serious problems, including increased susceptibility to heatstroke, as well as heart attack, stroke, and sudden death. I have written to FDA Commissioner McClellan asking him if there is any evidence that proves that these stimulant ingredients that are being marketed in "ephedra-free" products are any safer than ephedra, and asking him if FDA shares the concern of many experts who believe that stimulants pose particular health risks.

TRIBUTE TO JON J. FEY

HON. WILLIAM O. LIPINSKI

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 30, 2003

Mr. LIPINSKI. Mr. Speaker, I rise today to honor Jon Fey for his 27 years of dedication to the community of Berwyn, Illinois, located in my District on the southwest side of Chicago. Mr. Fey will be presented with the Berwyn Development Corporation's 2003 "Charles E. Piper Award" at a distinguished ceremony on November 8, 2003.

I am honored to pay tribute to Jon for his dedication and years of service to building a better Berwyn. He is the founder and owner of SWF Products, a national promotional products business on Ogden Avenue in Berwyn. Jon graduated from Miami University, Ohio, earning a degree in Business Administration, and since has joined his family in generations of successful entrepreneurs.

Jon Fey is the current president of the Berwyn Development Corporation, a charitable and educational nonprofit organization that has enhanced the community for twenty years. I salute him for his active involvement in the community and commend the BDC as it celebrates its 20th Anniversary this year. Jon Fey and the BDC are dedicated to improving the overall business climate in the City of Berwyn. Presently, Jon is responsible for the creation of the New Business Taskforce within the BDC, generating business contacts and interest in local opportunities. Past accomplishments also include sitting on the board for two terms, participating over the years as Treasurer, serving as a member and chairman of the organization's Ogden Avenue/South Berwyn Depot District TIF Advisory Commission, and as a member of the Commercial Load Committee.

The commitment and energy given by Jon Fey to his community have been an inspiration to many individuals. Since 1990, he has contributed valuable time and effort as president of the Berwyn Preservation of Historic Route 66. Jon continues his involvement and support of the annual Berwyn Historic Route 66 Car Show Committee, which promotes the Ogden Avenue business district in Berwyn and draws thousands of vintage car enthusiasts to the area.

Mr. Speaker, I ask that my colleagues join me in honoring Jon Fey on his achievements and wish Jon many years of future success.

BREAST CANCER AWARENESS MONTH

HON. STEPHANIE TUBBS JONES

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 30, 2003

Mrs. JONES of Ohio. Mr. Speaker, I rise today in support of National Breast Cancer Awareness Month. In October 2003, the National Breast Cancer Awareness Month campaign celebrates 18 years of educating women about breast cancer, especially the importance of detecting the disease in its earliest stages through screening mammography, clinical breast examination, and for women 20 years of age and older, breast self-examination.

The third Friday in October each year is National Mammography Day, first proclaimed by President Clinton in 1993. On this day, or throughout the month, radiologists provide discounted or free screening mammograms.

In 2002, more than 680 American College of Radiology (ACR) accredited facilities took part. In 2003, National Mammography Day was celebrated on October 17.

Ohio ranks as the 6th highest percentage of new cases of breast cancer in the nation. Ohio ties with Illinois for the 6th highest percentage of deaths due to breast cancer in the nation.

All women are at risk for developing breast cancer. The older a woman is, the greater her chances of developing breast cancer. Approximately 77% of breast cancer cases occur in women over 50 years of age.

According to the Surveillance, Epidemiology, and End Results (SEER) Program of the National Cancer Institute:

White, Hawaiian, and African-American women have the highest incidence of invasive breast cancer in the United States (approximately four times higher than the lowest group);

Korean, American Indian, and Vietnamese women have the lowest incidence of invasive breast cancer in the United States.

African-Americans have the highest death rate from breast cancer and are more likely to be diagnosed with a later stage of breast cancer than White women;

In the age groups, 30–54 and 55–69 years, African-American women have the highest death rate from breast cancer, followed by Hawaiian women, and white non-Hispanic women. However, in the 70 year old age group, the death rate from breast cancer for white women is higher than for African-American.

The key to surviving breast cancer is early detection and treatment. According to the American Cancer Society, when breast cancer is confined to the breast, the five-year survival rate is close to 100%. The early detection of breast cancer helps reduce the need for therapeutic treatment and minimizes pain and suffering, allowing women to continue leading happy, productive lives.

Beginning at the age of 20, every woman should practice monthly breast self-exams and begin a routine program of breast health, including scheduling physician performed clinical breast exams at least every three years. As a woman ages, her risk of breast cancer also increases. About 77% of women with breast cancer are over age 50 at the time of diagnosis. Women between the ages of 20 and 29 account for only 0.3% of breast cancer cases.

Beginning at the age of 40, all women should have annual screening, mammograms, receive clinical breast exams each year, and practice breast self-exams every month.

Mr. Speaker, I rise today to reiterate my support for National Breast Cancer Awareness Month. "Making Strides Against Breast Cancer," is a true pink slogan of this year's American Cancer Society campaign to educate women and girls about breast cancer. In 2000, the ACS fought to make the Breast and Cervical Cancer Treatment Act federal law, earmarking \$1,000,000,000 to treat medically underserved women. The reality is that breast cancer spells death for approximately 40,000 women in the U.S. a year. There is an urgency to educate and support early detection, which is critical to prevent this ugly mass.

The cost of breast cancer on women's lives cannot be overstated. As Cleveland "Plain Dealer" columnist Regina Brett stated in 2000: "The approximate cost for surgery for breast cancer is \$6,000. Four cycles of chemotherapy is approximately \$5,000. Six weeks of radiation is \$16,000. Living to see your children grow up: PRICELESS." Day after day, when dollars are not provided for research and or treatment, more women struggle and don't receive the medical assistance that is needed. If you don't have insurance or enough revenue Liz Schulte, president of Northern Ohio Breast Cancer Coalition states, "you quit your job, sell your car, give up your home and go on disability."

FILIPINO WORLD WAR II VETERANS

HON. BOB FILNER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 30, 2003

Mr. FILNER. Mr. Speaker and colleagues, I rise today to report on the progress we are making towards the passage of benefits for Filipino World War II veterans.

My colleagues know of the extreme sacrifices made by Filipino soldiers during World War II in the battles of Bataan and Corregidor. They know that Filipino soldiers were instrumental in the successful outcome of this war in the Pacific. And they know, too well, that many of these soldiers were denied their benefits by a law passed by the 1946 Congress.

Today, I am happy to report that the House of Representatives and the Senate Veterans' Affairs Committee have passed legislation to restore health care services, improved disability compensation, and burial benefits to many Filipino World War II veterans living in the United States. We are working to get this legislation passed by the Senate and forwarded to the President to sign into law.

In addition, the President announced during his recent visit to the Philippines that we will be doubling, from \$500,000 to \$1 million in FY2004, the amount of medical supplies and equipment that the United States is sending to the veterans' hospital in Manila.

These are important steps in restoring benefits to the brave Filipino World War II soldiers who have been waiting for sixty years for equity.