

USAREUR worked closely to forge new relationships with Russian Ground Forces and the Armies of the new NATO member nations.

In his capacity as USAREUR, General Meigs also achieved a number of unprecedented innovations in command and control capability, Blue Force Tracking among them.

The Secretary of Defense appointed General Montgomery Meigs Director of the Joint Improvised Explosive Device Defeat Organization (JIEDDO) on 16 December 2005. The Task Force has the responsibility to lead, advocate, and coordinate all Department of Defense actions in support of the Combatant Commanders' efforts to defeat improvised explosive devices (IED) as weapons of strategic influence.

In other key assignments during his military career, General Meigs specialized in leader development, military education, war planning, support and execution of contingency operations, and finding and implementing technological solutions for intelligence and command and control capability.

As Commandant of the Army's Command and General Staff College, he led the effort to write a new leadership manual for the Army and implemented case study methods in the Staff College's leadership instruction. In addition he has published a book, *Slide Rules and Submarines*, as well as numerous articles in professional journals.

Following his retirement, General Meigs assumed the duties as the Tom Slick Visiting Professor of World Peace at the LBJ School of Public Affairs, University of Texas at Austin. He then moved to the Louis A. Battle Chair of Business and Government Policy at the Maxwell School of Citizenship and Public Affairs at Syracuse University. He also served as a consultant for NBC News and as a member of the Board of Trustees of the MITRE Corporation.

General Meigs has served our nation as an exemplary officer, a strategic thinker, and an innovator. His leadership of our anti-IED effort is currently saving lives by bringing critical technology and training to our men and women in harm's way.

I would like to express my sincere gratitude to General Meigs and wish him continued success in his future endeavors.

IN HONOR OF BRIGADIER
GENERAL PAUL W. TIBBETS, JR.

HON. DEBORAH PRYCE

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, November 1, 2007

Ms. PRYCE of Ohio. Madam Speaker, it is with a heavy heart that I rise today to honor the life and courage of the pilot of the Enola Gay, Brigadier General Paul W. Tibbets, Jr., for his heroism and service to our great nation. General Tibbets passed away today at the age of 92 in Columbus, Ohio, a city he called home for more than thirty years.

General Tibbets will forever be known for his role in piloting the Enola Gay's historic flight of August 6, 1945. No one can presume to understand the pressures Brig. Gen. Tibbets must have felt when confronted with the enormity of this mission. Having thoroughly distinguished himself by leading the first American Flying Fortress raids over occupied Europe, as well as the first bombardment

missions over North Africa, it was his successful completion of the flight of the Enola Gay that would inextricably alter the course of human history.

To fully appreciate General Tibbets' accomplishments, one must understand that Paul Tibbets was not simply the pilot of the Enola Gay, but that he played a pivotal role in every facet of this critical mission, from inception to completion. He organized, selected and trained his entire crew. He significantly altered the design of the aircraft to allow the plane to fly beyond the range of anti-aircraft fire. And, perhaps most importantly, he was one of a select few entrusted with the full understanding of the implications and magnitude of our mission on August 6th, 1945.

In the sixty years that have followed, General Tibbets' legacy has been unfortunately clouded by political and philosophical debates over the consequences of dropping the bomb on Hiroshima, and of the nuclear arms race that ensued. As a pilot and patriot, General Tibbets dutifully performed his mission without passion or prejudice, and irrespective of the destructive cargo his plane stored. While academics can debate the numbers, clearly hundreds of thousands of lives—both American and Japanese—were spared by the attack on Hiroshima, and a devastating world war was ended. General Tibbets' place in history is secure, and his mission must never be obfuscated through revisionist history—he is, without qualification, an American hero.

In a rare speech on the subject in 1994, General Tibbets stated, "I am an airman, a pilot. In 1945, I was wearing the uniform of the US Army [Air Forces] following the orders of our Commander in Chief. I was, to the best of my ability, doing what I could to bring the war to a victorious conclusion—just as millions of people were doing here at home and around the world. We had a mission. Quite simply, bring about the end of World War II. I feel I was fortunate to have been chosen to command that organization and to lead them into combat. To my knowledge, no other officer has since been accorded the scope of responsibilities placed on my shoulders at that time."

General Tibbets served out his life as an exemplary American . . . a patriot, a veteran, a loving husband of more than 50 years, and a national hero whose indelible imprint on history should be forever honored and revered.

A TRIBUTE TO LAKEVIEW BIOMASS PROJECT

HON. GREG WALDEN

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Thursday, November 1, 2007

Mr. WALDEN of Oregon. Madam Speaker, I rise today to tell you about a very significant event taking place in Lakeview, OR, today. Because this event is the culmination of unselfish hard work by a dedicated group who shared a vision of a better tomorrow for Lake County, I am very proud to stand to tell you that a model for future management of our natural resources is becoming a reality today.

Three Saturdays ago, I traveled to Lakeview to tour a visionary effort, the Lakeview Biomass Project, which has become the talk of energy and natural resource organizations throughout the Nation. The dedicated people

behind the Lakeview Biomass Project have found an innovative way to move us swiftly in the direction toward our rich national heritage of healthy forests, vibrant local economies, and energy independence.

As our forests become choked and overgrown to the point that they are being decimated by fire and insect infestations, the people in Lake County made a decision to reverse that downward spiral through an amazing partnership of business, Federal and State agencies, and the local community.

Madam Speaker, the word "synergy" has been used for years as a buzzword to denote a process that creates a whole that is greater than the sum of the parts. This is certainly the case in Lakeview. Although their concept was innovative, it was also founded on plain old Eastern Oregon common sense.

At the risk of minimizing the massive scope of the effort that went into this project, let me boil it down to its simplest elements. Brush and small diameter trees will be taken out of the local forests in the process of making them healthier and fire resilient. That material will either be cleanly burned in a plant that produces steam and electricity or milled into dimension lumber at the Collins Fremont Sawmill. The steam will heat the mill's kiln dryer and will turn the turbines of the generator. Jobs at the mill will be more secure, and new jobs will be generated to operate the biomass plant and to treat our forests.

Madam Speaker, I toured the new mill and was very enthused to see that small trees that likely would have burned in inevitable catastrophic wildfires can now be put to clean and productive use through state-of-the-art technology. I salute the Collins family for their vision and for their unflagging support of the Lakeview area in making a significant investment in the future, at a time when lumber producers throughout the Northwest have gone out of business.

I am very impressed with Marubeni Sustainable Energy for their commitment to build a 13 megawatt plant at the site of the mill at a cost of over \$30 million. My colleagues will be pleased to know that the U.S. Forest Service and the Bureau of Land Management participated extensively in this process and worked with Lake County Resources Initiative to provide a 10-year supply through stewardship contracting, and they are working toward a 20-year memorandum of understanding that will pave the way for productive use well into the future. Madam Speaker, you can take pride in knowing that the energy incentives provided by this body and signed by the President have been a significant stimulus in making this concept work.

There are so many people to recognize for this success, but certainly I must mention the Lake County Commissioners who were so very proud to show me this project earlier this month. Jim Walls of the Lake County Resource Initiative has been tireless in his efforts to move this project forward. My friend, Governor Ted Kulongoski, saw the merit of this project early on and designated it as an Oregon Solutions Project that brought all of the stakeholders together and, with the direction of Steve Greenwood, kept the focus on target. Hal Salwasser of Oregon State University served as the driving force in his role as convener. I also want to acknowledge local leaders in the environmental movement who have worked hard to develop a project that will have

a long term beneficial impact on our federal forests.

I know, Madam Speaker, that time allows me to only mention a few of the many who made this project a success, but the most exciting part of the whole story is that this is just the beginning. The City of Lakeview and Lake County are hard at work at putting other renewable sources of energy to work. They plan to expand on their already successful use of geothermal and are working toward solar generation at a former Air Force radar site in the small community of Christmas Valley.

We can all take pride in knowing that communities like Lakeview are taking their destiny into their own hands and creating models for the future that can sustain both Northwest communities and forests.

SUPPORTING THE OBSERVANCE OF BREAST CANCER AWARENESS MONTH

SPEECH OF

HON. HEATH SHULER

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Monday, October 29, 2007

Mr. SHULER. Mr. Speaker, I rise today in strong support of H. Con. Res. 230, observing Breast Cancer Awareness Month. I offer my thoughts and prayers to those who have lost family members to breast cancer, and offer hope and encouragement to those who are currently battling the disease.

Breast cancer is the leading cause of death among women aged 45 to 54, and 1 out of 8 women will be diagnosed with the disease over the course of their lifetime. It is expected that over 180,000 new cases of breast cancer will be diagnosed in 2007 alone.

Fortunately, there is hope. When breast cancer is detected at early stages the survival rate for women is over 98 percent. Annual mammograms and monthly self-examinations are essential in detecting breast cancer at early stages.

Research has significantly increased our understanding of breast cancer. While there is still no cure for breast cancer, researchers have identified key risk factors for the disease.

I applaud the national and community organizations that promote awareness of breast cancer, offer support to those that are battling the disease, and provide information about early detection. It is imperative that these organizations continue their work to educate women about the disease and encourage monthly self-exams and annual mammograms.

I ask my colleagues to join me in observing Breast Cancer Awareness Month.

CLAIBORNE E. REEDER, DISTINGUISHED PROFESSOR OF PHARMACOECONOMICS, CONCERNED ABOUT FDA POSITION ON COMPOUNDING

HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, November 1, 2007

Mr. TOWNS. Madam Speaker, I would like to call my colleagues' attention to an out-

standing letter written by Claiborne E. Reeder, RPh, PhD, to FDA Commissioner von Eschenbach, expressing grave concern about recent FDA actions which adversely affect the compounding of medications for individual patients which is an important part of the practice of pharmacy. With 35 years of experience as a Pharmacist and educator, Dr. Reeder is a distinguished professor of Pharmacoeconomics and a nationally recognized leader in his field. In his letter, he urges Commissioner von Eschenbach to reconsider the FDA's position on compounding and comply with the federal ruling in Medical Center Pharmacy v. Gonzales which recognizes that the practice of Pharmacy is rightfully governed by the respective State Boards of Pharmacy.

Madam Speaker, I am entering Dr. REEDER's letter into the RECORD.

COLUMBIA, SC,
October 19, 2007.

ANDREW C. VON ESCHENBACH,
*Food and Drug Administration,
Office of the Commissioner,
Rockville, MD.*

DEAR COMMISSIONER VON ESCHENBACH: I am writing to express my concerns about the Food and Drug Administration's (FDA) recent actions regarding compounded medications prepared for individual patients as part of the practice of pharmacy. The agency's position on compounding medications, coupled with its actions against several compounding pharmacies and its intervention and influence on recent Centers for Medicare and Medicaid Services (CMS) policies on compounded medications, establishes a dangerous precedent that will affect patient access to needed medications. Compounding medicines is an essential component of the practice of pharmacy that provides physicians with the opportunity to provide patients with medicines that are prepared to the specific needs of the individual. Compounding and preparing medications pursuant to a valid prescription or physician's drug order has always been and should continue to be a professional prerogative that is governed by the pharmacy regulatory boards within each state. Governance of the practice of pharmacy is a state responsibility and should not be a matter for federal intervention.

Ignoring the recent Federal court decision Medical Center Pharmacy v. Gonzales, 451 F. Supp.2d 854, 865 (W.D. Tex. 2006), the FDA reasserted its legal position "that all compounded drugs are unapproved new, and therefore illegal, drugs under the Federal Food, Drug and Cosmetic Act (FDCA)". Contrary to the FDA's position, the Federal Court held that "compounded drugs, when created for an individual patient pursuant to a prescription from a licensed practitioner, were implicitly exempt from the new drug definitions contained in the Act". The Federal Court seems to understand the issue very clearly and recognizes that medications compounded for individual patients pursuant to a valid prescription are not "new drugs" and are therefore not under the purview of the FDCA or the FDA.

As a pharmacist/educator with 35 years of experience, I appreciate the FDA's concern for quality, safety and efficacy of medicines. That said, I also know that pharmacists are educated and trained in the "art and science" of pharmacy which includes compounding medicines for patients who need them. The broad interpretation "that all compounded drugs are unapproved new, and therefore illegal drugs" is a very slippery slope of regulatory intrusion on the practice of pharmacy as is FDA's practice of exercising its enforcement discretion

through reliance on the 2002 Compliance Policy Guide, Section 460.200. Many patients have medication needs that are unmet by commercially available products. Patients often require a particular strength or dosage form of a drug that is not available on the market. Also, commercially available products may contain additives or excipients to which the patient is allergic or intolerant. To declare compounded medications illegal is to deny these patients access to needed medicines.

Compounding medicines is not limited to the typical community environment. Hospitals, skilled nursing facilities, and specialty pharmacy providers prepare medications to order as part of their daily practice. Do the FDA and CMS positions mean that preparation of parenteral and enteral solutions as well as other extemporaneous products, within these settings is no longer legal? If not, then a disparity is created.

To further illustrate the consequences of the Agency's position on compounding, CMS, without explanation or medical rationale, reversed its long standing policy on inhalation medications by excluding compounded inhalation medications for Medicare beneficiaries stating that they were no longer "medically necessary". This new CMS policy, based on FDA's position, may have far-reaching and serious consequences for Medicare beneficiaries who rely on nebulizer medications. Eliminating compounding will severely restrict access to these and other critical medications for Medicare beneficiaries. Moreover, the policy will limit physicians' abilities to prescribe the medicines in the strengths, formulations, and routes of administration that are best for patient care.

I am asking that the FDA to reconsider its position and comply with the Federal court ruling. The practice of pharmacy is governed by the respective state Boards of Pharmacy through the powers granted by their legislatures. Compounding is an integral part of the practice of pharmacy and should thus fall under the governance of the profession at the state level.

Thank you for considering my comments in this matter. If you or anyone at the FDA would like to discuss this issue in more detail, I would be delighted to do so.

Sincerely,

CLAIBORNE E. REEDER,
*Distinguished Professor of
Pharmacoeconomics.*

INTRODUCING A RESOLUTION EN- COURAGING INCREASED FED- ERAL AND STATE SUPPORT FOR HOME AND COMMUNITY-BASED SERVICES

HON. ALCEE L. HASTINGS

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Thursday, November 1, 2007

Mr. HASTINGS of Florida. Madam Speaker, I rise today to introduce a resolution calling for increased funding for Federal and State home and community-based services for individuals with disabilities of any age, and especially the elderly. It is fitting that I introduce this bill today because November is National Home Care and Hospice Month.

The resolution which I am introducing today highlights the overall cost-effectiveness and improved outcomes in quality care for the elderly and disabled who are furnished health care in their homes or other community settings. By increasing financial assistance and