

the beginning of the year. Increases in gas prices have affected every sector of the economy. We are paying \$2 more whenever we get a pizza delivered, \$10 more for lawn mowing services, \$1.70 for shipping packages, an extra penny for every letter that we send, and these are just a few examples of the effects of gas price increases on the economy at large. As American families suffer, oil companies continue to rake in record profits. It is essential that we prevent price gouging, speculation, and profiteering by those who would take advantage of our energy predicament and guard against harm to commuters and struggling families.

Current law does not have a mechanism for allowing the investigation and punishment of individuals and corporations that are artificially inflating the price of energy. H.R. 6346 would grant the Federal Trade Commission the authority to investigate and punish those who engage in price gouging. H.R. 6346 would finally provide a clear definition of price gouging so that the FTC can prosecute the worst offenders, specifically those companies with more than \$500,000,000 in sales per year. It would strengthen the criminal penalties for price gouging to up to \$150 million for corporations, and fines of up to \$2 million plus jail sentences of up to 10 years for individuals. Finally, it would redirect the fines assessed to help fund the Low Income Home Energy Assistance Program (LIHEAP).

Unfortunately, we are seeing examples across the country of unscrupulous individuals taking advantage of consumers during this energy emergency. Last week, New Jersey's Attorney General Anne Milgram released the results of an investigation that uncovered over 350 ticket worthy instances of gasoline price manipulation after a survey of 1,000 gas stations in the state. Among the citations issued were: 62 violations for the pump not accurately measuring fuel, 46 violations for per-gallon prices being different on each side of the pump, 37 violations for fuel grades not posted, 26 violations for inaccurate octane ratings, 19 violations for inaccurate total sale price calculation and 14 violations for multiple price changes in a 24-hour period. States like New Jersey are already taking action to prosecute gas price manipulation on a small scale; however, they do not have the means necessary to prosecute large-scale offenders. It is past time that Congress gives the FTC the tools it needs to protect American consumers from these egregious violations at the pump and the legislation before us today takes an important first step towards achieving this goal.

Passing H.R. 6346 would help to prevent price gouging and I urge my colleagues to support this legislation. However this bill is merely a short term solution to our long term energy needs. There are no easy answers to the fluctuating gas prices. We are paying at the pump today for flawed decisions made years ago. That is why we must work to implement strategies that will lower demand for oil in the long term.

Mr. STUPAK. Mr. Speaker, I yield back my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Michigan (Mr. STUPAK) that the House suspend the rules and pass the bill, H.R. 6346, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. STUPAK. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

SENSE OF CONGRESS REGARDING DANDY-WALKER SYNDROME AND HYDROCEPHALUS

Ms. HOOLEY. Mr. Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 163) expressing the sense of Congress in support of further research and activities to increase public awareness, professional education, diagnosis, and treatment of Dandy-Walker syndrome and hydrocephalus, as amended.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 163

Whereas Dandy-Walker syndrome is the most common congenital malformation of the cerebellum and its causes are largely unknown;

Whereas between 10,000 and 40,000 people have Dandy-Walker syndrome in the United States;

Whereas the incidence of Dandy-Walker syndrome is at least 1 case per every 25,000 to 35,000 live births, however this is likely a significant underestimate because of difficulties diagnosing the syndrome;

Whereas the Metropolitan Atlanta Congenital Defects Program, Centers for Disease Control and Prevention reports that Dandy-Walker syndrome may affect as many as 1 in 5000 live born infants;

Whereas approximately 70 to 90 percent of patients with Dandy-Walker syndrome have hydrocephalus;

Whereas Dandy-Walker syndrome accounts for approximately 1 to 4 percent of hydrocephalus cases;

Whereas patients with Dandy-Walker syndrome present with developmental delay, enlarged head circumference, or signs and symptoms of hydrocephalus;

Whereas Dandy-Walker syndrome affects males and females approximately equally;

Whereas seizures occur in 15 to 30 percent of patients with Dandy-Walker syndrome;

Whereas subnormal intelligence is manifested in 41 to 71 percent of patients with Dandy-Walker syndrome;

Whereas failure to diagnose Dandy-Walker syndrome with hydrocephalus in a neonate or a child can cause serious neurologic complications;

Whereas Dandy-Walker syndrome is named after former University of New Mexico neurosurgeon and professor Arthur E. Walker (1907-1995) and Walter E. Dandy (1883-1941), who first described the disorder in 1914; and

Whereas there are 2 known researchers dedicated to Dandy-Walker Syndrome in the United States and additional investigators are needed; Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That—

(1) Congress commends the Director of the National Institutes of Health for working with leading scientists and researchers to organize the first National Institutes of Health

conference on hydrocephalus in September 2005 and the Inaugural "Cerebellar Development: Bench to Bedside International Conference" in November 2006; and

(2) it is the sense of Congress that—

(A) the Director of the National Institutes of Health should continue the current collaboration, with respect to Dandy-Walker syndrome, among the National Human Genome Research Institute, the National Institute of Biomedical Imaging and Bioengineering, the National Institute of Child Health and Human Development, the National Institute of Neurological Disorders and Stroke, and the Office of Rare Diseases;

(B) further research into the epidemiology, diagnosis, pathophysiology, disease burden, and improved treatment of Dandy-Walker syndrome and hydrocephalus should be conducted and supported; and

(C) public awareness and professional education regarding Dandy-Walker research should increase through partnerships between the Federal Government and patient advocacy organizations, such as the Dandy-Walker Alliance and the Hydrocephalus Association.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Oregon (Ms. HOOLEY) and the gentleman from Nebraska (Mr. TERRY) each will control 20 minutes.

The Chair recognizes the gentlewoman from Oregon.

GENERAL LEAVE

Ms. HOOLEY. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Oregon?

There was no objection.

Ms. HOOLEY. Mr. Speaker, I yield myself as much time as I may consume.

I rise in support of H. Con. Res. 163 which supports continued research to increase public awareness, professional education, diagnosis, and treatment of Dandy-Walker Syndrome and hydrocephalus.

Dandy-Walker Syndrome is a congenital brain malformation that affects the cerebellum and the fluid spaces around it. Symptoms often develop early in infancy robbing children of their future potential just as their lives are beginning. Its causes are largely unknown, but what is known is that it can have a devastating impact on a child. A baby with Dandy-Walker Syndrome may experience developmental delays, enlarged head size, and severely reduced intellectual capabilities.

Dandy-Walker Syndrome was discovered almost 100 years ago in 1914 by former University of New Mexico neurosurgeon and professor Arthur E. Walker and Dr. Walter E. Dandy. A cure for the disease remains elusive.

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The resolution before us supports the continuing research collaboration into Dandy-Walker syndrome. It recognizes the work of the National Institutes of Health with the National Human Genome Institute, the National Institute

of Biomedical Imaging and Bioengineering, the National Institute of Child Health and Human Development, the National Institute of Neurological Disorders and Stroke, and the Office of Rare Diseases.

H. Con. Res. 163 also encourages increased collaboration between the Federal Government and patient advocacy organizations seeking to find a cure for Dandy-Walker syndrome.

I would like to thank my colleagues, Congresswoman HEATHER WILSON and Congressman CHRIS VAN HOLLEN, for their efforts in bringing this resolution to the floor today. I urge my colleagues to join me in support of H. Con. Res. 163.

I reserve the balance of my time.

Mr. TERRY. I yield myself as much time as I may consume.

Mr. Speaker, I, too, rise in favor of H. Con. Res. 163, which is sponsored by the gentlewoman from New Mexico, HEATHER WILSON. She has worked diligently on this issue and has helped raise public awareness for the 10,000 to 40,000 approximate Americans currently diagnosed with Dandy-Walker syndrome. I commend her on her work with H. Con. Res. 163 and support further research and activities to increase public awareness, professional education, diagnosis, and treatment of Dandy-Walker syndrome and hydrocephalus.

Currently, the National Institute of Neurological Disorders and Stroke at the NIH conducts and supports a wide range of studies that explore the complex mechanisms of normal brain development. The knowledge gained from these fundamental studies provides the foundation for understanding abnormal brain development and offers hope for new ways to treat and prevent developmental brain disorders such as Dandy-Walker syndrome.

Dandy-Walker syndrome is a congenital brain malformation that can appear dramatically or develop unnoticed. Symptoms, which often occur in early infancy, include slow motor development and progressive enlargement of the skull. In older children, symptoms of increased intracranial pressure such as irritability, vomiting, and convulsions, and signs of cerebellar dysfunction such as unsteadiness, lack of muscle coordination, or jerky movements of the eyes may occur. Other symptoms include increased head circumference, bulging at the back of the skull, problems with the nerves that control the eyes, face and neck, and abnormal breathing patterns. Dandy-Walker syndrome is frequently associated with disorders of other areas of the central nervous system, and subnormal intelligence is manifested in 41 to 71 percent of the patients.

Treatment for the one in every 25,000 to 35,000 individuals diagnosed with Dandy-Walker syndrome generally consists of treating the associated problems with a special tube to drain off excess fluid inside the skull. This will reduce intracranial pressure and help control the swelling.

Mr. Speaker, I urge Members to recognize the outstanding research that the NIH has conducted and commend them on their efforts to gain more insight into brain disorders such as Dandy-Walker syndrome and hydrocephalus. I, again, congratulate the gentlelady from New Mexico, HEATHER WILSON, and the gentleman from Maryland in their interests in helping these folks and bringing this resolution to the floor today.

I reserve the balance of our time.

Ms. HOOLEY. Mr. Speaker, I'm pleased to yield 4 minutes to the gentleman from Maryland, CHRIS VAN HOLLEN. I know he has worked very hard on this issue.

Mr. VAN HOLLEN. I thank my colleague.

Mr. Speaker, I rise in strong support of this resolution, which supports further research and also activities to increase public awareness, professional education, diagnosis, and treatment of Dandy-Walker syndrome and hydrocephalus.

I, too, want to thank our colleague from New Mexico, HEATHER WILSON, for her leadership on this issue, her persistence on this issue. She has met with families from around the country who are struggling with Dandy-Walker syndrome, and I thank her for all the good work that she has done on this matter.

As we've heard, this is a very rare birth defect that's commonly associated with hydrocephalus. It can cause neurological damage that will delay development and cause severe developmental problems and sometimes lead to death. The Centers For Disease Control and Prevention reports that the Dandy-Walker syndrome may affect one in 5,000 infants, of which approximately 70 to 90 percent will go on to develop hydrocephalus.

The causes of this disease are largely unknown, and current treatment for Dandy-Walker consists primarily of treating the associated problems, the symptoms, rather than the syndrome itself. And as we heard, hydrocephalus is treated today much in the same way it was back in 1952, when this syndrome was first identified, by inserting a special tube called a "shunt" into the brain to drain off excess fluid.

We're here today because we think we need to focus more efforts and research in this area, that we shouldn't allow 1950s medical treatment to dictate how Dandy-Walker syndrome and hydrocephalus are treated. That is why we need to learn more about this syndrome and continue to raise public awareness about this condition. And that's why the National Institutes of Health should continue the current collaboration and research that they are doing and increase that effort.

I've had the privilege of getting to know a family with a child who has Dandy-Walker syndrome and hydrocephalus. While waiting for the birth of their child in 2005, Andrea and Eric Cole of Kensington, Maryland, learned

that their son would be born with Dandy-Walker syndrome. Their son, Ryan, was born 3 months prematurely. He weighed 1 pound, 15 ounces.

On learning that there was no national organization or support network already organized to advocate on behalf of individuals with Dandy-Walker syndrome, Eric and Andrea took the necessary steps to found the only national nonprofit organization for Dandy-Walker syndrome, the Dandy-Walker Alliance. We're very proud that they are with us today.

The Dandy-Walker Alliance is an organization that's launched a variety of educational programs, publications, activities, and other efforts to raise public awareness and understanding of the Dandy-Walker syndrome.

Mr. Speaker, what we're trying to do today is send a message to families across the country who have members of their family who have Dandy-Walker syndrome, to let them know that they are not alone in this fight, that Congress is listening to their concerns, and that Congress is taking action to encourage all the resources that we can bring to bear through the NIH and other organizations to help fight this syndrome, and to make sure that those around the country who have not been heard until recently really have a voice, not just here on the floor of the Congress, but through the resources that we can focus on this very important issue.

So I urge my colleagues to join me in passing this resolution. Again, I congratulate our colleague from New Mexico, HEATHER WILSON, for her leadership.

Mr. TERRY. At this time, I yield as much time as she may consume to the author, the gentlelady from New Mexico.

Mrs. WILSON of New Mexico. I thank my colleague from Nebraska.

I also wanted to thank my colleague from Maryland, CHRIS VAN HOLLEN, for joining me in this effort and being the lead cosponsor of House Concurrent Resolution 163. There are 105 Members of this body who are cosponsors of this resolution, and it's intended to increase awareness of a syndrome that, frankly, before someone came and talked to me about it, I had never heard of. My guess is most of our colleagues have never heard of Dandy-Walker syndrome because it affects a relatively small number of families, but it's a very serious syndrome that deserves attention and research and understanding.

The resolution encourages the National Institutes of Health and the Centers for Disease Control to do more research on the causes and cures and prevalence of the disease and to encourage education of medical doctors so that it can be quickly and accurately diagnosed.

Even the estimates of the number of children who suffer from Dandy-Walker vary greatly. Somewhere between 10,000 and 40,000 children in America

suffer from this syndrome, and it is very serious and often very difficult to diagnose, a combination of developmental delays, enlarged head circumference, hydrocephalus and seizures, that together define a syndrome that was initially described by a neurosurgeon and professor at the University of New Mexico named Dr. Arthur Walker. He initially described nine cases of what is now known as Dandy-Walker in 1942.

Early detection and diagnosis, accurate diagnosis, is critical for these children, particularly because of the coincidence of hydrocephalus in children, a very serious condition that can result in neurological complications if it's not diagnosed very early in life.

Currently, there are only five researchers in the United States who are focused on Dandy-Walker and trying to understand it, develop treatments, and perhaps eventually develop ways to prevent the disease.

This resolution expresses the sense of the Congress that further research and activities are needed to increase public awareness, to increase professional education, and to make sure physicians and the medical community are aware of what this syndrome's characteristics are so that it can be accurately diagnosed.

It also commends the National Institutes of Health on their first-ever sponsorship of a research workshop focused on hydrocephalus and Dandy-Walker, and acknowledges the need for continued collaboration between different institutes and centers at NIH.

Some of my colleagues have commended me for my leadership on this issue, and I have to demur in that regard. Sometimes I think that the best thing about being a Representative is that you are often the wagon that harnesses the enthusiasm and the passion of others. I would like to recognize where that passion really comes from: Eric Cole and his wife Andrea, who are here in the gallery today. They are the proud parents of Ryan.

The fact is that Eric's dad called me. Eric's dad and I served in the Air Force together, and one time, Captain Don Cole tried to teach me something about politics at the United States Air Force Academy. There are people in this body who would probably disagree as to how well I learned those lessons. But Captain Cole's son is Eric Cole. His grandson is Ryan, and Ryan suffers from Dandy-Walker syndrome.

I want to commend Eric for his leadership, for making a decision to get involved, not only to help his son but to help others who suffer from the same disease. It is because individuals choose to get involved that things change over time.

I would like to place into the RECORD a letter of support from the March of Dimes in support of this resolution. It's dated June 22, 2007.

Again, I'd like to thank my colleague, Mr. VAN HOLLEN of Maryland, for working with us on this resolution and for his staff member, Ray Thorn, who's been particularly helpful in this

process. Also, I would like to recognize two of my colleagues, Mr. ADERHOLT of Alabama and Mr. RYAN of Ohio, for their support and their encouragement on this resolution.

I would urge my colleagues to support this resolution to move forward on the understanding and the research and the professional education associated with a syndrome that adversely affects close to 40,000 young Americans.

MARCH OF DIMES,
Washington, DC, June 22, 2007.

Hon. HEATHER WILSON,
House of Representatives,
Washington, DC.

DEAR REPRESENTATIVE WILSON: On behalf of more than 3 million volunteers and 1400 staff members of the March of Dimes Foundation, I am writing to commend you for introducing H. Con. Res. 163, expressing the sense of Congress in support of further research and activities to increase public awareness, professional education, diagnosis and treatment of Dandy-Walker syndrome and hydrocephalus.

As you may know, in the United States, about 3% of all babies are born with a major birth defect. Birth defects are the leading cause of infant mortality accounting for more than 20% of all infant deaths. Children with birth defects who survive often experience lifelong physical and mental disabilities, and are at increased risk for developing other health problems. In fact, birth defects contribute substantially to the nation's health care costs. According to Centers for Disease Control and Prevention (CDC), the lifetime economic cost of caring for infants born each year with 1 of the 18 most common birth defects exceeds \$8 billion.

Yet, the causes of nearly 70% of birth defects are unknown. Therefore, March of Dimes is working with Members of Congress from both sides of the aisle to increase funding for the National Center on Birth Defects and Developmental Disabilities, with particular focus on the groundbreaking research being done through the National Birth Defects Prevention Study. This important CDC initiative is being carried out by 9 regional Centers for Birth Defects Research and Prevention. The Centers use medical histories, DNA samples and data on environmental exposures, and lifestyle obtained from parents to study gene-environment interactions. The study has already yielded critical information on certain birth defects and has been particularly useful in responding to public health concerns regarding possible links between medication exposures and birth defects. The study also holds promise for increasing our understanding of the effects of medication use during pregnancy.

Increased federal support for birth defects research and prevention is sorely needed and H. Con. Res. 163 will heighten awareness and encourage additional federal research on Dandy-Walker syndrome and other serious birth defects.

Thank you for your leadership to help improve the health of infants and know that all of us at the March of Dimes look forward to working with you on this and other initiatives to improve the health of each and every child.

Sincerely,

MARINA L. WEISS,
Senior Vice President,
Public Policy & Government Affairs.

Ms. HOOLEY. We have no other speakers, if you would like to close. I'm happy to do that after you.

Mr. TERRY. Mr. Speaker, I want to close by thanking the gentlelady from New Mexico and the gentleman from Maryland (Mr. VAN HOLLEN) for bring-

ing this to the floor, helping to increase public awareness and provide education and training to physicians for early diagnosis, and encouraging the NIH to continue their research to help those with Dandy-Walker and hydrocephalus.

With that, I would encourage all of our colleagues today to vote "aye" in support of this measure.

I yield back my time.

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Ms. HOOLEY. Mr. Speaker, again I urge an "aye" vote.

This bill will give families with Dandy-Walker Syndrome hope. It is something we can all come together on. People need to know that we listen when they speak. And this is a way to make sure that further research is done on a disease that's been around for a long time. Most of us didn't know about it before this bill.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Oregon (Ms. HOOLEY) that the House suspend the rules and agree to the resolution, H. Con. Res. 163, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. TERRY. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

The point of no quorum is considered withdrawn.

SENSE OF HOUSE REGARDING PROSTATE CANCER DETECTION AND TREATMENT

Ms. HOOLEY. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 353) expressing the sense of the House of Representatives that there should be an increased Federal commitment supporting the development of innovative advanced imaging technologies for prostate cancer detection and treatment, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 353

Whereas the annual commemoration of Men's Health Week during the week preceding Father's Day gives new reason to consider the critical need to improve detection and treatment of prostate cancer;

Whereas prostate cancer now strikes at least one in six American men, with African-American men having a 60 percent higher incidence rate than Caucasian men and a mortality rate twice as high;

Whereas each year more than 230,000 American men are newly diagnosed with prostate