

CONSOLIDATED REPORT OF EXPENDITURE OF FUNDS FOR FOREIGN TRAVEL BY MEMBERS AND EMPLOYEES OF THE U.S. SENATE, UNDER AUTHORITY OF SEC. 22, P.L. 95-384—22 U.S.C. 1754(b), COMMISSION ON SECURITY AND COOPERATION IN EUROPE FOR TRAVEL FROM JAN. 1 TO MAR. 31, 2009—Continued

Name and country	Name of currency	Per diem		Transportation		Miscellaneous		Total	
		Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency
Austria	Euro		1,430.19						1,430.19
Senator Roger Wicker:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,430.19						1,430.19
Representative Alcee Hastings:									
Austria	Euro		1,301.89						1,301.89
Representative Mike McIntyre:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,430.19						1,430.19
Fred Turner:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,430.19						1,430.19
Robert Hand:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,180.19						1,180.19
Macedonia	Denar		1,574.00						1,574.00
United States	Dollar				6,135.92				6,135.92
Shelly Han:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,430.19						1,430.19
Alex Johnson:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		2,869.18						2,869.18
Albania	Lek		1,152.00						1,152.00
United States	Dollar				9,282.19				9,282.19
Daniel Redfield:									
Israel	Shekel		1,446.00						1,446.00
Syria	Pound		548.54						548.54
Austria	Euro		1,430.19						1,430.19
Winsome Packer:									
Austria	Euro		3,340.00						3,340.00
United States	Dollar				6,092.28				6,092.28
Croatia	Kuna		586.00						586.00
Montenegro	Euro		1,905.00						1,905.00
United States	Dollar				1,682.14				1,682.14
Clifford Bond:									
Macedonia	Denar		1,524.00						1,524.00
United States	Dollar				9,403.92				9,403.92
Total			46,445.18		32,596.45				79,041.63

SENATOR BEN CARDIN,
Chairman, Committee on Security and Cooperation in Europe, Apr. 20, 2009.

CONSOLIDATED REPORT OF EXPENDITURE OF FUNDS FOR FOREIGN TRAVEL BY MEMBERS AND EMPLOYEES OF THE U.S. SENATE, UNDER AUTHORITY OF SEC. 22, P.L. 95-384—22 U.S.C. 1754(b), MAJORITY LEADER FOR TRAVEL FROM FEB. 15 TO FEB. 18, 2009

Name and country	Name of currency	Per diem		Transportation		Miscellaneous		Total	
		Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency
Jessica Lewis:									
Argentina	Peso		1,078.00						1,078.00
Brazil	Real		1,028.00						1,028.00
United States	Dollar				7,440.20				7,440.20
Delegation Expenses	Dollar					110.00			110.00

SENATOR HARRY REID,
Chairman, Majority Leader, Apr. 23, 2009.

CONSOLIDATED REPORT OF EXPENDITURE OF FUNDS FOR FOREIGN TRAVEL BY MEMBERS AND EMPLOYEES OF THE U.S. SENATE, UNDER AUTHORITY OF SEC. 22, P.L. 95-384—22 U.S.C. 1754(b), REPUBLICAN LEADER FOR TRAVEL FROM DEC. 1 TO DEC. 9, 2008

Name and country	Name of currency	Per diem		Transportation		Miscellaneous		Total	
		Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency	Foreign currency	U.S. dollar equivalent or U.S. currency
Tom Hawkins:									
United States	Dollar				8,244.63				8,244.63
Israel	Dollar		1,446.00						1,446.00
Belgium	Dollar		396.78			77.66			474.44
Don Stewart:									
United States	Dollar				8,244.63				8,244.63
Israel	Dollar		1,446.00						1,446.00
Belgium	Dollar		396.78			64.66			461.44
Total			3,685.56		16,489.26		142.32		20,317.14

SENATOR MITCH MCCONNELL,
Chairman, Republican Leader, Apr. 21, 2009.

AUTHORIZING THE USE OF EMANCIPATION HALL

Mr. DODD. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of H.

Con. Res. 80, which was received from the House.

The PRESIDING OFFICER. The clerk will report the concurrent resolution by title.

The legislative clerk read as follows:

A concurrent resolution (H. Con. Res. 80) authorizing the use of Emancipation Hall in the Capitol Visitor Center for an event to celebrate the birthday of King Kamehameha.

There being no objection, the Senate proceeded to consider the concurrent resolution.

Mr. DODD. Mr. President, I ask unanimous consent that the concurrent resolution be agreed to, the motion to reconsider be laid upon the table, with no intervening action or debate, and any statements related to this measure be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The concurrent resolution (H. Con. Res. 80) was agreed to.

INCREASING RESEARCH, AWARENESS, AND EDUCATION ABOUT CEREBRAL CAVERNOUS MALFORMATIONS

Mr. DODD. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of S. Res. 148, submitted earlier today.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The legislative clerk read as follows:

A resolution (S. Res. 148) expressing the sense of the Senate that there is a critical need to increase research, awareness, and education about cerebral cavernous malformations.

There being no objection, the Senate proceeded to consider the resolution.

Mr. UDALL of New Mexico. Mr. President, Joyce Gonzales had been suffering for 15 years when she was diagnosed. A cluster of blood vessels in her cervical spinal cord were giving her discomfort and pain, but for years her doctors could not understand why. When they were finally able to diagnose her, a quick operation relieved her pain and gave her her life back.

Joyce's second cousin was not so lucky. Her experience with the same mysterious illness ended in a fatal cerebral hemorrhage. She was nine years old.

Medical science has made great strides in unlocking the mystery of illnesses that have plagued humanity for centuries. Scientific breakthroughs have helped control and eliminate diseases that once threatened the life and health of millions. Yet for all our progress, we still face threats that we do not understand and therefore cannot stop.

One of these threats is cerebral cavernous malformation, also known as CCM, or cavernous angiomas. CCMs are caused by abnormal blood vessels that form clusters, known as angiomas, in the brain or spinal cord. If these lesions bleed or press up against structures in the central nervous system, they can cause seizures, neurological deficits, hemorrhages, or severe headaches. CCM took 15 years of Joyce Gonzales's wellbeing, and it took the life of her nine-year-old cousin. With more knowledge of this mysterious killer, both tragedies might have been avoided. With today's resolution, I hope we can move one step towards that knowledge.

In the overall population, about 1 in 200 people has a cavernous angioma, and about one-third of these affected individuals become symptomatic at some point in their lives. In some Hispanic families, however, the rate of prevalence is significantly higher. CCM is what is known as an autosomal dominant disease, which means that each child of an affected parent has a 50-percent chance of inheriting it.

In New Mexico, this genetic mutation has been traced back to the original Spanish settlers of the 1580s. It has now spread down and across at least 17 generations, resulting in what could be tens of thousands of cases of the illness in our State. New Mexico has the highest population density of this illness in the world. The States of Arizona, Texas, and Colorado may not be far behind.

Unfortunately, and in some cases tragically, many of those who suffer from this disease do not know it. Even worse, New Mexico and the Nation face a shortage of physicians who are familiar with the illness. This makes it dangerously difficult to receive a timely diagnosis and appropriate care. It puts potentially thousands of individuals at risk of a stroke, a seizure, or even sudden death.

This dangerous ignorance of a potential killer results in part from a lack of research on the disease. NIH funds only eight projects on CCM. This, despite indications from staff at the National Institute of Neurological Disorders and Stroke that CCM may be a "paradigm illness," meaning research findings on CCM could shed light on other illnesses with similar characteristics.

To fight this ignorance and save lives, I am introducing this resolution today to express the sense of the Senate that there is a critical need to expand education, awareness and research on CCM. I thank my colleagues, Senators MCCAIN, BINGAMAN, LEVIN, KERRY, and VITTER for joining me to urge for increased resources.

This is only a preliminary step in the fight against this disease, but it is an important one. A Senate resolution would send the message that we take this disease seriously. It would encourage ongoing research efforts targeted at the disease and increase public knowledge that could lead to accurate diagnoses and saved lives.

In the long run, I believe a Center of Excellence is needed to advance research and provide cutting edge treatments for families with CCM. This Center would also advance science, health care, and medical education in the Southwest, while providing jobs for New Mexicans who want to serve their fellow citizens. An expansion of the existing DNA/tissue and clinical database is also needed. The current database is underfunded, which means that it cannot accept all the samples that are offered. I will be working on both of these issues.

Before I close, I want to thank three people who have been at the forefront

of efforts to understand and fight CCM—Joyce Gonzales, Dr. Leslie Morrison of the University of New Mexico, and Connie Lee, president of the Angioma Alliance. It is my honor to once again join them in this fight by introducing this resolution in the Senate today.

When it comes to diseases like CCM, knowledge can save lives. We can raise the public's and the medical community's understanding of this devastating disease with this resolution. I urge my colleagues to support it.

Mr. DODD. Mr. President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, the motions to reconsider be laid upon the table, with no intervening action or debate, and any statements related to the resolution be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 148) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 148

Whereas cerebral cavernous malformation (in this resolution referred to as "CCM"), or cavernous angioma, is a devastating blood vessel disease that has enormous consequences for people affected and their families;

Whereas cavernous angiomas are malformations in the brain that cannot be detected easily, except through very specific medical imaging scans;

Whereas people with CCM are rarely aware that they have the disease, which makes taking blood thinners or aspirin risky;

Whereas, according to the Angioma Alliance, in the general population, 1 in approximately 200 people has CCM;

Whereas, according to the Angioma Alliance, more than ½ of the people with CCM experience symptoms at some point in their lives;

Whereas, according to the Angioma Alliance, there is a hereditary form of CCM, caused by a mutation or deletion on any 1 of 3 genes, that is characterized by multiple cavernous malformations;

Whereas, according to the Angioma Alliance, each child born to parents with the hereditary form of CCM has a 50 percent chance of having CCM;

Whereas, according to the Angioma Alliance, a specific genetic mutation of CCM called the "common Hispanic mutation", which has been traced to the original Spanish settlers of the Americas in the 1590's, has now spread across at least 17 generations of families;

Whereas while CCM is more prevalent in certain States, families throughout the United States are at risk;

Whereas a person with CCM could go undiagnosed until sudden death, seizure, or stroke;

Whereas there is a shortage of physicians who are familiar with CCM, making it difficult for people with CCM to receive timely diagnosis and appropriate care;

Whereas the shortage of such physicians has a disproportionate impact on thousands of Hispanics across the United States;

Whereas CCM has not been studied sufficiently by the National Institutes of Health and others;

Whereas there is a need to expeditiously initiate pilot studies to research the use of medications to treat CCM; and