

111TH CONGRESS
1ST SESSION

H. RES. 611

Supporting the goals and ideals of “Fragile X Awareness Day”.

IN THE HOUSE OF REPRESENTATIVES

JULY 7, 2009

Mr. HARE (for himself, Mr. DELAHUNT, Mr. HARPER, and Mr. BILBRAY) submitted the following resolution; which was referred to the Committee on Energy and Commerce

RESOLUTION

Supporting the goals and ideals of “Fragile X Awareness Day”.

Whereas fragile X syndrome is the most commonly known cause of inherited mental impairment in the world;

Whereas an expansion of the CGG trinucleotide repeat in the FMR1 gene—a human gene that codes for a protein called fragile X mental retardation protein—causes almost all cases of fragile X syndrome;

Whereas fragile X mental retardation protein is normally made in many tissues, especially in the brain and the testes;

Whereas fragile X mental retardation protein may play a role in the development of synaptic connections between nerve cells in the brain where cell-to-cell communication occurs;

Whereas there is a unique relationship between fragile X syndrome and autism;

Whereas fragile X syndrome is the most commonly known single-gene cause of autism;

Whereas up to one-half of all children diagnosed with fragile X syndrome also have autism or an autism spectrum disorder;

Whereas over 100,000 people in the United States have fragile X syndrome and over 1,000,000 people in the United States carry a fragile X mutation and have or are at risk of developing a fragile X-associated disorder;

Whereas fragile X-associated disorders include fragile X syndrome, which causes language, behavioral, and developmental disabilities; fragile X-associated tremor/ataxia syndrome—an adult onset progressive neurological condition causing tremors and balance and memory problems primarily in male carriers that can lead to decreased life expectancy; and fragile X-associated primary ovarian insufficiency—a cause of infertility, early menopause, and other ovarian problems in female carriers;

Whereas doctors can accurately identify and diagnose fragile X syndrome, fragile X-associated tremor/ataxia syndrome, and fragile X-associated primary ovarian insufficiency;

Whereas the National Institutes of Health is currently funding a study that will lay the groundwork for screening of all newborns in the United States for early detection of the fragile X mutation;

Whereas increased research into fragile X syndrome can lead to a better understanding of the disorder, more effective treatments, and an eventual cure; and

Whereas advocacy organizations have designated July 22 as “Fragile X Awareness Day”: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) supports the goals and ideals of “Fragile X
3 Awareness Day”;

4 (2) supports raising awareness and educating
5 the public about fragile X syndrome and associated
6 disorders;

7 (3) applauds the efforts of advocates and orga-
8 nizations that encourage awareness, promote re-
9 search, and provide education, support, and hope to
10 those impacted by fragile X syndrome;

11 (4) recognizes the commitment of parents, fam-
12 ilies, researchers, health professionals, and others
13 dedicated to finding an effective treatment and cure
14 for fragile X syndrome;

15 (5) urges all physicians, health care providers,
16 and specialists to—

17 (A) learn the clinical signs and symptoms
18 of fragile X syndrome, fragile X-associated dis-
19 orders, fragile X-associated primary ovarian in-
20 sufficiency, and fragile X-associated tremor/
21 ataxia syndrome;

22 (B) use diagnostic, developmental screen-
23 ing, and surveillance modalities to detect fragile
24 X-associated disorders;

1 (C) test, when appropriate, individuals ex-
2 hibiting signs of developmental delay or an au-
3 tism spectrum disorder to determine the status
4 of their FMR1 gene;

5 (D) gain a full understanding of the ge-
6 netic implications of all fragile X-associated dis-
7 orders, and when appropriate, make a referral
8 to a geneticist or genetic counselor to assure
9 that affected individuals and their families are
10 aware of how a fragile X-associated disorder
11 may impact their extended family; and

12 (E) provide patients diagnosed with fragile
13 X-associated disorders with supplemental infor-
14 mation maintained by the Centers for Disease
15 Control and Prevention, the National Institute
16 of Child Health and Human Development, and
17 private foundations such as the National Frag-
18 ile X Foundation and the FRAXA Research
19 Foundation;

20 (6) encourages all private and public health in-
21 surance entities to provide full coverage for screen-
22 ing technologies, appropriate followup referrals, and
23 genetic counseling services related to the detection,
24 proper diagnosis, and treatment of fragile X-associ-
25 ated disorders;

1 (7) recommends that the National Institutes of
2 Health and related member institutes fully imple-
3 ment the research plan on fragile X syndrome and
4 associated disorders developed by the Trans-NIH
5 Fragile X Research Coordinating Group and Sci-
6 entific Working Groups; and

7 (8) supports increased funding for research into
8 the causes, treatment, and cure for fragile X syn-
9 drome.

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