

Now we must repair and rebuild as we heal our wounds and our wounded. We need technical assistance to rebuild our infrastructure, we need international peacekeepers to enforce our cease-fire, we need foreign investment to restore our industrial base, we need equipment and expertise to clear away the deadly debris of war. We also need loans and credits to stimulate our economy, as well as debt relief and restructuring.

SAVIMBI INVITED FOR TALKS

We have launched our democracy. Our elected National Assembly is at work and soon we will hold the final round of our presidential elections. Meanwhile, our former foes will be joining us in governing the nation by assuming positions of major responsibility. They will be Cabinet ministers, provincial governors, mayors, ambassadors and much more. The two former enemy armies will join together in a national defense force as most former combatants are demobilized.

I have invited UNITA leader Jonas Savimbi to meet with me at any time and any place in Angola so we may show our people we are fully engaged together in national reconciliation and reconstruction.

A new page is being turned in Angola's history. It presents new challenges for Angolan political leaders, government officials, and ordinary citizens as we try to reconstruct a third time from the rubble and ruins of the tragedy that devastated Angola. We call upon the United States and the international community to join us in our historic task of making peace work not just for ourselves but for a continent that is struggling hard to spread the blessings of peace and democracy to all its citizens.

MARTIN LUTHER KING, JR. MEMORIAL WITHIN THE DISTRICT OF COLUMBIA

HON. CONSTANCE A. MORELLA

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Tuesday, February 28, 1995

Mrs. MORELLA. Mr. Speaker, I rise today to reintroduce legislation to authorize the establishment of a memorial, on Federal land within the District of Columbia, to Martin Luther King, Jr.

Alpha Phi Alpha, which Dr. King joined in Boston on June 22, 1952, is one of the oldest African-American fraternities in the Nation. With more than 700 chapters in 42 States, its members include some of the most prominent leaders and distinguished officials within the United States. The fraternity wishes to honor Dr. King's remarkable role with a memorial in the Nation's Capitol. It is the fraternity's belief that a memorial will provide a tangible recognition that will assist in passing Dr. King's message from generation to generation. Alpha Phi Alpha will coordinate the design, construction, maintenance and funding of the monument. The bill provides that the monument be established entirely with private contributions and at no cost to the Federal Government. The Department of the Interior, in consultation with the National Capital Park and Planning Commission and the Commission on Fine Arts, will select the site and approve the design.

I am very pleased to recognize Dr. Martin Luther King, Jr. as one of our Nation's greatest leaders in the ongoing struggle to achieve full equality for all of our citizens. In a very short lifespan of 39 years, this man created a

moral, political and religious revolution that is indelible within the minds and hearts of Americans. As a man of peace, Dr. King recognized that along with freedom comes a strong measure of responsibility and accountability from all Americans. He showed us that civil rights is not just a struggle for the rights of black Americans, but a struggle to ensure the rights of all Americans. His gospel often proclaimed that injustice anywhere is a threat to justice everywhere.

Dr. King's mission is still unfinished. Racism and inequality, distrust and misunderstanding continue to divide us as a Nation. We must continue to challenge the American conscience and strive to create economic and civil equality for all of our citizens. For the future youth of our country, a memorial will provide a tangible reminder of our Nation's history and to our relentless struggle to eliminate injustice and prejudice.

Mr. Speaker, Dr. King dedicated his life to achieving economic and civil equality for all Americans, through nonviolent means. I believe that he made an indelible impression, of what one individual can do, on the minds and hearts of all Americans. I believe that a memorial would provide a tangible symbol to our Nation's youth of this country's commitment to economic, social, and legal justice. I therefore urge my colleagues to join me in this effort to ensure that the essential principles of justice and equality among our citizenry are never forgotten.

TRIBUTE TO SAN DIEGO POLICE OFFICER PATRICK R. MILLER

HON. BOB FILNER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, February 28, 1995

Mr. FILNER. Mr. Speaker, and colleagues, I rise today to pay tribute to a hero in my district who helps his community day after day, week after week, year after year. This hero is San Diego Police Officer Patrick R. Miller.

Officer Miller is a man who is fulfilling his life's dream. Since childhood, he desired to become a police officer—and that dream became reality 6 years ago after successfully being accepted and completing the police academy. Officer Miller furthered his career by graduating from the highly competitive Special Weapons and Tactics [SWAT] Academy last spring.

Officer Miller is praised by his fellow officers and community residents as a model police officer—one who treats people as human beings, while doing his job with precision and professionalism.

On the morning of February 2, 1995, Officer Miller was shot five times during a routine traffic stop. He was very seriously wounded. Fortunately, Officer Miller survived the incident and is recovering from his injuries.

Officer Miller has proven to be a respected and hard working police officer for the city of San Diego. I wish him a quick and complete recovery—and a speedy return to the duties he performs so well.

I salute Officer Patrick R. Miller for his hard work, dedication, and tenacity. He is an excellent example of the impact that one person can have on the community.

LEGISLATION TO PROVIDE MEDICAL CARE COVERAGE FOR MULTIPLE SCLEROSIS TREATMENTS

HON. JOHN J. LaFALCE

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, February 28, 1995

Mr. LaFALCE. Mr. Speaker, today I am reintroducing a bill which is truly vital to the hundreds of thousands of people in this country suffering from multiple sclerosis, a physically debilitating disease. The Multiple Sclerosis Home Treatment Act of 1995 would provide Medicare beneficiaries with reimbursement for the cost of beta-interferons, the most effective treatments for MS we have ever seen and the only type of MS treatment approved by the FDA.

Mr. Speaker, before I describe my bill I would like to tell you a little bit about multiple sclerosis and the difficult consequences of the disease for its victims and their families.

MULTIPLE SCLEROSIS: A SNAPSHOT

It has been estimated that today between 250,000 and 350,000 Americans have MS. The disease usually strikes at the prime of productive life—most people are diagnosed between age 20, and age 40. For reasons which are unknown as yet, women comprise an estimated 73 percent of the MS population.

Although the cause of the disease has yet to be specifically determined, we do know that in MS the central nervous system is attacked, resulting in inflammation and breakdown of the protective covering of the nerves in the brain and spinal cord, and the formation of scarring lesions in those areas.

The disease concurrently results in a multitude of debilitating symptoms such as fatigue, impaired vision, loss of muscle coordination, tremors, and bowel and bladder dysfunctions. MS is most often characterized by recurrent and progressively more acute attacks of these symptoms, called exacerbations, between periods of relative physical stability. Exacerbations can and often do result in hospitalization.

The long-term effects of MS vary. Some people experience more complete recovery between exacerbations—relapsing-remitting MS—while others experience significant physical deterioration—relapsing—or chronic-progressive MS.

Still, MS is a disease of physical debilitation. People with MS often experience a loss of ability to perform simple daily tasks. In many cases the physical consequences of MS force the individuals to quit their jobs and leave the work force, requiring them and their families to make tough financial choices while continuing to address health care needs. An estimated 27 percent of people with MS are bedridden at least 1 out of every 14 days.

BETASERON: A BREAKTHROUGH TREATMENT

Last year, the Food and Drug Administration approved a treatment, beta-interferon 1-b—trade name, Betaseron—for use in relapsing-remitting MS. The FDA approved Betaseron through their newly created fast-track approval process, demonstrating the agency's recognition of both the importance of a treatment for MS and the success of Betaseron.

Betaseron is a type of beta-interferon, a protein genetically engineered to resemble similar

proteins in humans. The most significant aspect of Betaseron for MS patients is that it reduces the formation of new lesions in the brain, an occurrence widely thought to be connected with the progression of the disease.

On a day-to-day basis the results of Betaseron treatments are also proving dramatic. For example, Mr. Kevin Cloy of Middleport, NY, is a constituent and friend of mine. Mr. Cloy is 32 years old, and was diagnosed with MS in 1990. He was forced to quit his job due to the disabling effects of MS. In December 1993, Mr. Cloy became one of the first people to receive Betaseron treatments.

The change in his physical condition has been remarkable. The frequency of his exacerbations has significantly decreased, and his physical condition has stabilized enough that he no longer feels the need to be wheelchair-bound. Although he still remains at home during the day, he can return to doing simple tasks like walking to the mailbox. He is hopeful that the Betaseron treatments will allow him to return to the work force someday soon.

NEED FOR MEDICARE COVERAGE

Unfortunately, because Betaseron is a high-technology, genetically engineered treatment, it is also prohibitively expensive. Betaseron is injected under the skin at home every other day, and the injections cost approximately \$1,000 per month.

The expense of Betaseron is a grave problem for all people with MS, but especially for those like Kevin Cloy who are forced to leave the work force due to their MS-induced disability. Not only must they deal with the financial constraints of a lost income, but they also lose the coverage of any employer-provided health insurance as well. They generally become eligible for Medicare, but as we all know, Medicare does not cover prescription drugs and self-administrable treatments.

Mr. Cloy's situation again illustrates the problem. In March of last year, after Mr. Cloy left his job, he became eligible for Medicare and lost his private insurance coverage, thereby also losing coverage for prescription drugs.

When he became eligible to receive Betaseron treatments, he was therefore faced with a difficult choice—either expend all of his family's resources to pay for Betaseron, and eventually become destitute enough to be eligible for Medicaid—which does cover prescriptions—or go without Betaseron, a treatment which has changed his life.

Mr. Cloy has done everything feasible to avoid making that choice. He has drained his family's savings as much as possible in order to pay for Betaseron. Last spring, the residents of Middleport even organized a fundraiser for Kevin at a local restaurant. The fundraiser was successful, but the money raised only covers about 9-months worth of treatments.

Mr. Speaker, since the first introduction of my bill last year which would have provided Medicare coverage for Betaseron, I have heard from people across the Nation who have MS, from New York to California, from Arkansas to Illinois. Their stories have been chronicled in major newspapers like the Philadelphia Inquirer and the Orlando Sentinel. These people have experienced the very beneficial effects of Betaseron, and they are desperate for a solution to this problem of access.

NEW SCIENTIFIC DEVELOPMENTS

Last year, I introduced legislation to provide Medicare coverage for Betaseron, in order to

help these people and their families. This year, I am expanding the bill to cover all beta-interferons, a consequence of recent exciting scientific developments.

Another constituent and friend, Dr. Lawrence Jacobs, who is an esteemed researcher at the Multiple Sclerosis Center at Millard Fillmore Hospital in Buffalo, recently announced with his partner, Dr. Salazar of the National Institutes of Health, the development of a new beta-interferon which is promising to be more effective than Betaseron. This new substance would be used as an alternative to Betaseron.

The new beta-interferon, which will soon be before the FDA for formal approval, has been affirmatively proven to reduce the progression of the disease. The new substance better mirrors natural substances produced in our bodies, and therefore also produces less side-effects for the patients. It is also being developed to be injected once a week, instead of every other day.

Mr. Speaker, the preventive health aspects of beta-interferons are obvious. We can stop or significantly reduce the progression of the disease. We can substantially reduce the number of attacks these people experience. Since as estimated 41 percent of hospital stays of MS patients are covered by Medicare, we can also clearly reduce those costs to Medicare.

Moreover, we can reduce all of the other health care costs which are a consequence of a severe disability—physician visits, clinic visits, home health care, medical equipment, physical therapy—the list goes on and on. We may even be able to move many of these people back in to the work force, allowing them to leave Medicare altogether, a clear savings to taxpayers.

I believe that providing access to these beta-interferons is an excellent example of the successes of preventive health care. In slowing the progression of MS, and allowing these individuals to lead more productive lives, these treatments provide benefits which, in the long term, may far exceed the cost of the injections.

It is time we act to make these critical treatments available to all of those people with MS whose disabilities are so severe that they have lost their jobs and their private health insurance. I urge the Congress to adopt this important legislation.

RED INK GREATER THREAT THAN RED ARMY

HON. BARNEY FRANK

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, February 28, 1995

Mr. FRANK of Massachusetts. Mr. Speaker, one of the gravest errors that the Republican majority is in the process of making is to increase military spending over what we have already voted while it proposes serious cuts in important domestic programs. And for those who do not share my sense that these programs should be preserved, the increase in defense spending can be seen as a threat to further deficit reduction, or even to tax reductions for those who prefer that course. In any case, spending money that we do not need on the military at a time when we are short of resources is an error. For this reason, I will from

time to time be sharing with my colleagues knowledgeable commentary from national security experts who are pointing out that it is a grave error to increase military spending, and that in fact, given the collapse of the Soviet Union, the severe weaknesses of the Russian military, the untapped ability of our Western European and East Asian allies to do far more in the area of military spending, we in fact can afford to make further reductions in the military without in any way endangering national security or the well-being of the men and women who have so gallantly volunteered to defend us.

Recently, one of the most distinguished experts in the national security field, former Director of Central Intelligence William Colby, wrote an article in the Hill on February 22 pointing out how unwise it is to increase—and even maintain—the current level of military spending. Mr. Colby's tenure as Director of Central Intelligence began in the Nixon administration and extended into the administration of Gerald Ford, so he can hardly be dismissed as the voice of Democratic liberalism. His hard-headed, persuasive argument for military spending reductions is an important contribution to our budget debate and I ask that it be printed here.

WHICH IS GREATER SECURITY THREAT: RED ARMY OR RED INK?

(By William E. Colby)

The Cold War is over, but you wouldn't know it from America's defense budget or from Republican calls for more defense spending. The once fearsome Red Army no longer threatens Europe at the Fulda Gap in North Germany. Instead, it hardly is able to enter a medium sized Chechnya city against lightly-armed partisans, even with the advantage of air power and heavy artillery.

But the U.S. defense budget still siphons off some \$250 billion from the national economy as political leaders talk about a balanced budget (but don't act to produce), promise middle income tax cuts instead of building savings, and vie to cut domestic and foreign programs. U.S. defense expenditures still amount of well over twice the \$121 billion spent by the eight other nations that conceivably could pose a threat to U.S. national interests, and over three times what Russia spends on its reduced, rusting and hapless military.

One would think that an intelligence assessment of dangers for the U.S. in the years ahead, and a strategic review of how we should respond, would focus on some of the obvious threats looming ahead in the economic field, which has now replaced military competition as the main arena of conflict in the post-Cold War world.

The most obvious danger is the national debt and its servicing costs, which threaten the economy and will crush almost all discretionary spending unless economically depressing and politically unpalatable new taxes are imposed. Similarly, the inexorable march of the Cold-War-era baby boomers toward senior-citizen status clearly threatens the Social Security system and will mean a generational conflict with a younger generation saddled with the bills. The sloshing of trillions of panicky dollars through global electronic markets, as just occurred with Mexico, is spreading to other emerging economies is today's real threat to the nation's economy—and security.

And it is not that the defense budget is beyond challenge, for need or for specifics. Former Secretary of Defense Les Aspin's "bottom up review" assumed two regional wars on the scale of the Gulf War, conducted