

Of course Julie and Elise's greatest contributions to the world came in the form of their two lovely daughters Adrian and Stacey. Both Adrian and Stacey are now married and have moved away from Astoria, but I know they have brought their parents' commitment to community betterment to their respective homes in Arlington, VA, and Hannacroix, NY.

In fact, I am particularly pleased to announce that the Wager family has recently grown by two members. Adrian Wager-Zito and her husband Michael Zito, are the new parents of a baby girl, Francesca Barrett Zito; Stacey Wager-Pacuk and her husband Edward Pacuk, are also the parents of a baby girl, Rebecca Grace Pacuk.

Therefore, it seems appropriate to me, as the Wager family has embarked upon a new generation, to request that my colleagues take a moment to salute two members of my community who have given so much of themselves for the betterment of others: Julie and Elise Wager—community activists, caring professionals, committed citizens, and, of course, proud grandparents.

RETIREMENT OF MASTER CHIEF  
JOSEPH RAMIREZ ADA

**HON. ROBERT A. UNDERWOOD**

OF GUAM

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, March 22, 1995*

Mr. UNDERWOOD. Mr. Speaker, I would like to commend and congratulate Master Chief Joseph Ramirez Ada, a native son of Guam, on his distinguished career and his well-earned retirement. He is a veteran submariner and one of the highest rated enlisted personnel in the Guam Area Command of the U.S. Navy. Master Chief Ada, the son of Jose Quichocho and Maria Ramirez Ada, first enlisted in the Navy back in 1966. He has since attained the rank of master chief quartermaster, one of the highest ranks in the naval enlisted tier, second only to the master chief petty officer of the Navy.

In addition to this extraordinary accomplishment, Master Chief Ada always represented the best that the island of Guam has to offer. Prior to his present post, he served aboard the U.S.S. *John Adams* (SSBN-620), the U.S.S. *Puffer* (SSN-652), and the U.S.S. *Haddock* (SSN-621). He was also assigned to the Submarine *Flotilla Eight* and the Navy Astronautics Group Detachment "Bravo." After this, he was named command senior chief of Submarine Group Seven and, later, command master chief of Development Group One. Throughout almost three decades of active duty service he was the deserving recipient of several significant military awards. In addition to seven Good Conduct Medals, two Navy Achievement Medals, two Navy Commendation Medals and a Meritorious Service Medal, Master Chief Ada is the first Chamorro to receive the Admiral Claude V. Ricketts Award for inspirational leadership.

Since being assigned to the Guam Area Command of the U.S. Navy, Master Chief Ada greatly assisted in many civic efforts. He assisted in combined military and civilian projects such as last year's 50th anniversary celebration of the liberation of Guam. His assistance was also instrumental in the island's recovery from natural disasters such as Ty-

phoon Omar and the earthquake of August 1993.

He has expressed great interest in our youth and local community through his volunteer work with the Guam Special Olympics and the assistance he provided local students in their high school drill and color guard competitions. He also supported local mayors in numerous military functions, parades, funerals, fiestas, and sister-village activities in addition to being a leader in the Navy's Community Partnership Programs.

After over 29 years of distinguished service, Master Chief Ada has chosen to retire from the Navy. An official retirement ceremony celebrating his accomplishments was held last Friday, March 17 on Guam. On behalf of the people of Guam, I would like to congratulate Master Chief Ada for his accomplishments, congratulate him on his well-earned retirement, and wish him the best in his future endeavors.

DR. MARTIN STEINBERG MAKES  
SIGNIFICANT ADVANCES IN THE  
TREATMENT OF SICKLE CELL  
ANEMIA

**HON. G.V. (SONNY) MONTGOMERY**

OF MISSISSIPPI

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, March 22, 1995*

Mr. MONTGOMERY. Mr. Speaker, I am pleased to call to the attention of my colleagues an article that recently appeared in the February 13-19, 1995 edition of *The Stars and Stripes*. The article features Dr. Martin Steinberg, the associate chief of staff for research at the Jackson, MS, VA Medical Center and his work in a nationally-recognized study of drug that may be the first successful treatment for severe cases of sickle cell anemia. Dr. Steinberg has been with the Jackson VA Medical Center since October 1967. He is well known for his expertise and is VA's sickle cell program director.

Dr. Steinberg's accomplishments in this area are another example of the tremendous research that is being done by the Department of Veterans Affairs, and all of us are extremely proud of Dr. Steinberg's work and his association with the Jackson VA Medical Center.

[From the *Stars and Stripes*, Feb. 1995]

VA RESEARCHER KEY FIGURE IN SICKLE-CELL  
ANEMIA BREAKTHROUGH

(By Dick Maggrett)

A researcher at the Jackson, MS, VA Medical Center has played a key role in a nationwide study of a cancer drug that proved to be the first successful treatment for severe cases of sickle-cell anemia, a blood disorder affecting 72,000 mostly black Americans.

Physician Martin Steinberg, an associate chief of staff for research, led a group studying hydroxyurea and its effects on sickle-cell patients. "This is a significant advance," he said.

Steinberg and his fellow scientists believe that hydroxyurea may work by stimulating the production of fetal hemoglobin, which is present in fetuses and newborn babies. By about four months of age, fetal hemoglobin has been replaced by adult hemoglobin.

Steinberg, who also is a professor of medicine at the University of Mississippi Medical Center, where some of the research was conducted, said hydroxyurea isn't a cure but that its administration was "the first effective

tive treatment for this serious illness and may greatly improve the quality of life of sickle-cell anemia patients."

In patients with the disease, hemoglobin molecules stick to one another, forming long rods inside red blood cells and causing them to take on a sickle-like shape and become rigid. The cells, unable to squeeze through tiny blood vessels, deprive tissue of an adequate blood supply and cause pain.

In the \$500,000 National Institutes of Health (NIH)-sponsored study that examined genetic analyses of patients, half received the drug and half a placebo. In this phase of the work, Steinberg examined the genetic determinants linked to the sickle hemoglobin gene.

Between January 1992 and April 1993 the study enrolled 299 adult sickle-cell anemia patients, 18 years of age and older, at 21 clinics in the United States. All patients had experience at least three pain crises within 12 months.

The only side effect was mild reversible bone marrow suppression, which caused lowering of blood counts.

The study showed that daily doses of hydroxyurea reduced the frequency of painful episodes and hospital admissions for sickle-cell crises by about 50 percent. Recurrent painful episodes are the most disabling feature of the illness and interfere with education, jobs and social development.

Hydroxyurea therapy also reduced the frequency of acute chest syndrome, a life-threatening complication characterized by chest pain, fever and an abnormal chest X-ray. Test patients taking the drug had about 50 percent fewer episodes of acute chest syndrome than those taking a placebo.

And patients on hydroxyurea also required about 50 percent fewer units of blood transfused than those on the placebo. This finding has "important" public health implications, according to the Jackson VAMC.

Hydroxyurea proved effective in dramatically reducing pain in adult patients with sickle-cell anemia, and NIH recently stopped drug trials four months early and notified 5,000 doctors of the treatment.

Steinberg hopes his research will discover the means of predicting which patients will respond best to the drug. He said he will attempt to determine whether it might be possible to foretell the response of fetal hemoglobin to hydroxyurea.

Steinberg cautioned that hydroxyurea may not be appropriate for all sickle-cell patients.

"The drug should not be used in patients likely to become pregnant," Steinberg said. "Long-term safety in adults and safety and effectiveness of treatment in children have not been determined."

And, Steinberg said, hydroxyurea also has the potential to cause life-threatening decreases in blood counts called "cytopenia."

Hydroxyurea hasn't been approved by the Food and Drug Administration for treatment of sickle-cell anemia, although physicians can prescribe it for that purpose. The FDA may consider approving hydroxyurea for sickle-cell anemia after Bristol-Myers Squibb, the drug's manufacturer, gets the study's results.

The VA facility couldn't say when that might be.

Hydroxyurea currently is used for treating polycythemia vera, a disease in which too many red blood cells are produced.

Sickle-cell anemia is an inherited disease most common in people with ancestors from Africa, the Middle East, the Mediterranean basin and India.

One in 12 African-Americans carries the sickle-cell trait.