

offered by the gentleman from Michigan (Mr. UPTON) that the House suspend the rules and pass the bill, H.R. 3880, as amended.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. FOSSELLA. 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 today, further proceedings on this motion will be postponed.

#### GENERAL LEAVE

Mr. FOSSELLA. Mr. Speaker, I ask unanimous consent that Members may have 5 legislative days within which to revise and extend their remarks and to include extraneous material on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

#### EXPRESSING THE SENSE OF CONGRESS REGARDING SCLERODERMA

Mr. FOSSELLA. Mr. Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 320) expressing the sense of Congress regarding Scleroderma, as amended.

The Clerk read as follows:

#### H. CON. RES. 320

*Whereas scleroderma is a debilitating and potentially fatal autoimmune disease with a broad range of symptoms which may be either localized or systemic;*

*Whereas scleroderma may attack vital internal organs, including the heart, esophagus, lungs, and kidneys, and may do so without causing any external symptoms;*

*Whereas more than 300,000 people in the United States suffer from scleroderma;*

*Whereas the symptoms of scleroderma include hardening and thickening of the skin, swelling, disfigurement of the hands, spasms of blood vessels causing severe discomfort in the fingers and toes, weight loss, joint pain, difficulty swallowing, extreme fatigue, and ulcerations on the fingertips which are slow to heal;*

*Whereas people with advanced scleroderma may be unable to perform even the simplest tasks;*

*Whereas 80 percent of the people suffering from scleroderma are women between the ages of 25 and 55;*

*Whereas scleroderma is the 5th leading cause of death among all autoimmune diseases for women who are 65 years old or younger;*

*Whereas the wide range of symptoms and localized and systemic variations of scleroderma make it difficult to diagnose;*

*Whereas the average diagnosis of scleroderma is made 5 years after the onset of symptoms;*

*Whereas the cause of scleroderma is still unknown and there is no known cure; and*

*Whereas the estimated annual direct and indirect costs of scleroderma in the United States are \$1,500,000,000: Now, therefore, be it*

*Resolved by the House of Representatives (the Senate concurring)*

*That it is the sense of the Congress that—*

*(1) private organizations and health care providers should be recognized for their efforts to promote awareness of and research on scleroderma;*

*(2) the people of the United States, including the medical community, should make themselves aware of the symptoms of scleroderma and contribute to the fight against scleroderma;*

*(3) the National Institutes of Health should continue to take a leadership role in research efforts regarding the fight against scleroderma and should allow for broad dissemination of the information learned from such research; and*

*(4) the Centers for Disease Control and Prevention should consider additional methods to improve disease surveillance of scleroderma.*

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. FOSSELLA) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from New York (Mr. FOSSELLA).

#### GENERAL LEAVE

Mr. FOSSELLA. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous matter on House Concurrent Resolution 320.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. FOSSELLA. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I am pleased that the House is considering today House Concurrent Resolution 320, introduced by the gentleman from Illinois (Mr. GUTIERREZ) to raise awareness about a terrible disease, Scleroderma. House Concurrent Resolution 320 was reported favorably by the Committee on Energy and Commerce last week, and I encourage my colleagues to express their support for the resolution on the floor today.

Over 100,000 Americans are affected by Scleroderma, a chronic connective tissue disease that is debilitating and potentially fatal. Scleroderma is actually a symptom of a group of rare diseases that involve the abnormal growth of connective tissue.

Scleroderma is derived from the Greek word sclerosis, literally meaning hard skin. The symptoms include hardening and thickening of the skin, swelling and disfigurement of the hands, weight loss, joint pain, difficulty swallowing, as well as extreme fatigue.

With this wide range of symptoms, scleroderma is often difficult to diagnose. For some patients, these diseases cause hard, tight skin; for others, the problem is much greater, affecting blood vessels and internal organs like the heart, lungs, and kidneys.

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Scleroderma affects people of all races and ethnic groups, men, women and children. For some Americans affected by scleroderma, recovery comes with time. For many others, there is no treatment that controls or stops the progression effectively. While scientists at the National Institute of Arthritis and Musculoskeletal and Skin Diseases continue to learn more about scleroderma, unfortunately, they do not know exactly what causes scleroderma, and there is still no cure.

The resolution before us today recognizes the work of private organizations and health care providers to raise awareness about scleroderma and encourages Americans to learn more about scleroderma. The resolution encourages the National Institutes of Health to continue to play a leadership role in discovering new treatments and disseminating information learned from their research. Finally, the resolution encourages the Centers for Disease Control and Prevention to consider how to improve disease surveillance of autoimmune diseases, including scleroderma.

Mr. Speaker, I encourage my colleagues to support the resolution.

Mr. Speaker, I reserve the balance of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield myself 2 minutes.

Mr. Speaker, we are considering an important resolution today sponsored by my colleague, the gentleman from Illinois (Mr. GUTIERREZ). I am pleased to be a co-sponsor of this legislation, which is intended to raise the profile of scleroderma, a debilitating autoimmune disease that affects around a third of a million Americans every year.

Diagnosis can be difficult in the early stages. Many symptoms of scleroderma are common to or may overlap those of other diseases. The disease is highly individualized. While scleroderma can show mild symptoms in some, it can also deliver a more life-threatening prognosis in others.

Scleroderma can show symptoms on the surface as in a skin rash or disguise itself by affecting the organs, the muscles or blood vessels. Diagnosis can require consultation with rheumatologists and dermatologists, in addition to blood studies and specialized tests depending on which organs are actually affected.

The Committee on Energy and Commerce last week passed this resolution unanimously. I urge my colleagues to support it.

Mr. GUTIERREZ. Mr. Speaker, I am grateful that my bill, the Support Scleroderma Research bill (H. Con. Res. 320) has been scheduled to be considered in the suspension calendar today. The speed with which this bipartisan bill has traveled from the committee mark-up to Floor consideration is a testament to the importance of this bi-partisan and non-controversial measure.

Scleroderma is a chronic, often progressive autoimmune disease in which the body's immune system attacks its own tissues. The disease can manifest itself in two forms: localized scleroderma, affecting the skin and underlying tissue and systemic scleroderma, also known as systemic sclerosis, a potentially life-threatening disease that attacks internal organs including the lungs, heart, kidneys, esophagus and gastrointestinal tract.

The wide range of symptoms and localized and systemic variations of the disease make it especially hard to diagnose. In fact, the average diagnosis is made five years after the onset of symptoms. Once diagnosed, however, people with this incurable disease can only look forward to symptomatic relief.