

And this shortfall is just for the active duty component. The Army Reserve recruited 82 percent of their May monthly goal, the Marine Corps Reserve just 88 percent of their monthly goal and the Navy Reserve brought aboard 94 percent of their monthly goal.

This is not a new trend. As of March 31st, four of the Reserve components were still falling significantly short of their recruiting objectives. In terms of year-to-date mission achieved, the Army Reserve, Army National Guard, Naval Reserve and Marine Corps Reserve were all nearly 20 percent below the number needed to achieve their yearly goals. This information should be frightening to every Member of Congress. Not only is the shortfall affecting the active duty components, it is trickling down to our Guard and Reserve as well.

Mr. Speaker, I think that this speaks volumes. So what steps have been taken to increase recruiting for the services?

The Army wants to double the enlistment bonus for certain hard to fill jobs to \$40,000 (as reported by USA Today on June 10) and the Army Times reports that the "Army is proposing a pilot program to provide up to \$50,000 in home mortgage help for those who sign up for active duty." All this on top of having spent nearly \$200 million on positive and upbeat television ads and increased their recruiter pool by 1,000. Moreover, the Army National Guard has announced that they will add another 500 recruiters for a total plus-up of 1,900 (to 4,600) in 2005. The Army Reserve is adding 734 for a total of 1,774.

Mr. Speaker, I do not believe that simply increasing the number of military recruiters and throwing more and more money in the faces of our nation's high-school and college students is going to solve the recruiting shortfall.

No, we need to dig deep to understand the factors that are causing these shortfalls and address the situation there.

A Congressional Research Service report on this very issue notes that the United States has become embroiled in several major military operations overseas "that have dramatically increased the operations tempo of the military services. This has been especially true in the Army, which has shouldered the bulk of the manpower burden associated with the occupation of Iraq. Additionally, more military personnel have been killed or wounded in Iraq than in any other conflict since the Vietnam War. Many observers have expressed concern that the current operations tempo, and the level of casualties in Iraq, might lead to lower recruiting and retention rates, thereby jeopardizing the vitality of today's all volunteer military."

There cannot be any disagreement that the Global War on Terror (specifically operations in Iraq and Afghanistan) has taken its toll on military recruitment and retention. And I'm not sure that anyone over at the Department of Defense is listening.

I don't fault young men and women when they balk at joining the armed forces this year—be it active duty, guard or reserve. This is not what they had been led to believe would happen in Iraq.

Not when we have seen more than 1,700 Americans perish in Iraq since March of 2003.

Not when 12,861 soldiers have been wounded in action.

Not when last month saw approximately 70 daily attacks by insurgents in Iraq.

Not when 67 percent of Active Duty Army troops have been deployed at least twice between 9/01 and 1/05.

Not when 30 percent of National Guard and 24 percent of Reserve troops were also deployed more than once in that same time-frame.

Not when we are sending troops to Iraq without the best armor, vehicles and equipment possible.

And not when this Administration routinely shortchanges the amount of money we should spend on Veterans in this nation all while mismanaging an unpopular war.

Mr. Speaker, our recruiting problems stem directly from the Administration's poor plan for Iraq. The young men and women in this great nation are not opposed to serving our nation in times of need. We know they are quite willing to sacrifice for the greater good. But I think it is undeniable that they do not believe protecting the oil pipelines by Iraq and unilaterally and preemptively attacking a nation that posed no strategic threat to the United States is a part of the greater good.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Mr. CUMMINGS) is recognized for 5 minutes.

(Mr. CUMMINGS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

EFFECTS OF ACCUTANE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. STUPAK) is recognized for 5 minutes.

Mr. STUPAK. Mr. Speaker, I come here tonight concerned about drug safety and to speak out to protect our children from the acne drug Accutane. As a legislator, I have called for more restrictions on the distribution and use of this drug, which is known to cause severe birth defects and a form of impulsive behavior and depression in patients taking this drug.

This drug has devastated my family with the loss of our son BJ and more than 268 other families who have lost their young son or daughter while he or she was taking Accutane.

News stories persist concerning the safety of our prescription drugs. When an FDA safety reviewer, Dr. David Graham, testified before the Senate Finance Committee this past winter, he stated, "I would argue that the FDA as currently configured is incapable of protecting America against another Vioxx." He went on to tell the Senate Finance Committee that "there are at least five other drugs on the market today that should be looked at seriously to see whether they should remain on the market." He cited the acne drug Accutane.

Why Accutane? Accutane is the poster child for why we need an independent body to approve and review drug safety. Accutane causes horrendous birth defects and may cause psychiatric disorders such as depression and suicide. It is linked to over 268 suicides, according to the FDA.

A recent study here by Dr. J. Douglas Bremner demonstrates how Accutane affects the brain, possibly causing impulsive behavior due to changes in the orbitofrontal cortex. This is the front part of the brain. This is an area known to cause or mediate depression.

As Dr. Bremner showed us in his study of the brain, there is a decrease in the metabolism of the brain. This chart here is of two PET scans of the same person's brain. The PET scan on your left establishes a baseline for the person before they took Accutane.

Now look at the second PET scan of the same person after 4 months on Accutane. Notice in the first scan before the Accutane the color red representing brain activity in the front part of the brain.

Now, on the second PET scan, the post-Accutane one, notice very little red, representing decreased brain activity in the same person after 4 months on Accutane therapy. Accutane decreases the metabolism in the front part of the brain, the area we know that mediates depression.

Dr. Bremner has concluded that this one patient here, there is a 21 percent decrease in brain metabolism in this patient. This change in the brain only occurred in Accutane patients.

Dr. Bremner performed PET scans on other non-Accutane patients who were taking a different oral antibiotic for acne. None of these patients experienced any brain changes.

Dr. Bremner also found that one-half of his Accutane patients in this study experienced a brain change, those who complained of severe headaches. Is it the excessive dosage found in the current formula of Accutane that is the cause of the change in the brain that we see in this PET scan?

The medical evidence is clear that Accutane causes changes in the brain, and this may be what leads some people to take their lives.

Let us join with Dr. Graham, the Centers for Disease Control, and other health care groups that have expressed strong concerns about the safety of this drug and who have called for Accutane to be withdrawn from the market as far back as 1990.

Let us pull Accutane from the market at least until we have all the answers surrounding this powerful drug. At the very least, the FDA should immediately require a large-scale review and study on the drug's effects on the brain.

Is this change of metabolism we see, that we see here, is it reversible? Will the brain repair itself? What amount or what dose of Accutane is safe? What amount or what dose of Accutane can be safely taken so the human brain is not affected? Has the FDA done enough to protect the American people, especially our young people, from the side effects of Accutane? Has the FDA seriously looked at Dr. Bremner's study and similar studies in animal testing, all of which demonstrate Accutane affects the brain?