

and fostering the exchange of knowledge and new ideas among scientists dedicated to cancer research, providing training opportunities for the next generation of cancer researchers and increasing public understanding of cancer.

On this, their centennial year of service, we commend the work of the American Association for Cancer Research and applaud their effort to make cancer research a national and international priority. We owe a debt of gratitude to organizations like the American Association for Cancer Research for their contributions in advancing the public awareness of cancer and for excellence among its membership in the field of cancer research.

I would like to thank my colleague, the gentleman from Utah (Mr. MATHESON), for his work in raising this important issue, and I urge my colleagues to join me in supporting this resolution.

Madam Speaker, I reserve the balance of my time.

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

Madam Speaker, it is a dreaded word in the English language, and it is called "cancer." Not a family in America is left unscathed or untouched by cancer and what it means to the families, and very often the terrible outcomes.

If there is a positive light, we know over the last several decades in particular, many health care professionals, organizations and groups have dedicated not just time and money and research, but their true passion to helping find a cure and treat cancer in many different ways.

I know on Staten Island this week we will have the annual breast cancer walk that will attract thousands of people, many of whom are survivors, and many who will work in remembrance and memorial of loved ones.

That is why I join my colleague, the gentlewoman from Wisconsin (Ms. BALDWIN), in support of H. Res. 448, expressing the sense of the House that there should be established a National Cancer Research Month. Perhaps it should be all year. I think it is important to at least acknowledge that National Cancer Research Month be this month.

The purpose of establishing this month is to provide an opportunity to better educate the public in an effort to make cancer research a national priority.

At the NIH, the National Cancer Institute conducts research into cancer in conjunction with numerous other institutes and centers. The NCI alone comprises one-third of the NIH's \$30 billion budget. The work being done at the NIH towards cancer research is invaluable. Establishing a Cancer Research Month can help highlight what is being done by the scientific community and how the public can become involved.

While acknowledging and putting aside this month is important, what is even more important is continuing to support the research of those caring, compassionate health care professionals and researchers who will one day find the cure for all cancers, and that should be our wish and national goal and priority.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I reserve the balance of my time to close.

Mr. FOSSELLA. Madam Speaker, I join my colleague from Wisconsin in supporting the resolution, and ask Members to support the resolution.

Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, I urge my colleagues to support this bill. As our Nation's researchers continue to move us closer to a cure for cancer, it is important for us to recognize the work that these researchers do. Each piece of research, each project is a vital part of the solution that we will achieve when a cure is discovered. I thank my colleague, Mr. MATHESON, for his work on this issue and urge passage of the resolution.

Mr. BACA. Madam Speaker, I rise today to voice my strong support for H. Res. 448. This bipartisan resolution expresses the sense of the House of Representatives that the United States should establish a National Cancer Research Month.

This year marks the 100th anniversary of the American Association for Cancer Research.

Thanks to research and expanded cancer education, we have more early detectors, preventative measures, and treatments for cancer than ever before.

But we still have a long road ahead of us. The American Cancer Society estimates that in the San Bernardino County alone, nearly 2,500 Americans will die from a cancer-related illness in the upcoming year.

Every American is touched by this horrible disease; thanks to great strides, the number of cancer-related deaths is declining.

Strengthening research and public awareness of cancer will lead to more scientific breakthroughs that can increase survival rates for cancer patients—and give our cancer survivors a better quality of life.

I urge my colleagues to cast a vote for hope, and to support this vital resolution.

□ 1700

Ms. BALDWIN. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the resolution, H. Res. 448.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

SUPPORTING THE GOALS AND IDEALS OF NATIONAL IDIOPATHIC PULMONARY FIBROSIS AWARENESS WEEK

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 182) recognizing the need to pursue research into the causes, a treatment, and an eventual cure for idiopathic pulmonary fibrosis, supporting the goals and ideals of National Idiopathic Pulmonary Fibrosis Awareness Week, and for other purposes.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 182

Whereas idiopathic pulmonary fibrosis is a serious lung disorder causing progressive, incurable lung scarring;

Whereas idiopathic pulmonary fibrosis is one of about 200 disorders called interstitial lung diseases;

Whereas idiopathic pulmonary fibrosis is the most common form of interstitial lung disease;

Whereas idiopathic pulmonary fibrosis is a debilitating and generally fatal disease marked by progressive scarring of the lungs, causing an irreversible loss of the lung tissue's ability to transport oxygen;

Whereas idiopathic pulmonary fibrosis progresses quickly, often causing disability or death within a few short years;

Whereas there is no proven cause of idiopathic pulmonary fibrosis;

Whereas more than 128,000 United States citizens have idiopathic pulmonary fibrosis, and more than 48,000 new cases are diagnosed each year representing a 156-percent increase in mortality since 2001;

Whereas idiopathic pulmonary fibrosis is often misdiagnosed or under diagnosed;

Whereas the median survival rate for idiopathic pulmonary fibrosis patients is 2 to 3 years; about two-thirds of idiopathic pulmonary fibrosis patients die within 5 years; and approximately 40,000 patients die each year; and

Whereas a need has been identified to increase awareness and detection of this misdiagnosed and under diagnosed disorder as well as all incarnations of pulmonary fibrosis: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That the Congress—

(1) recognizes the need to pursue research into the causes, a treatment, and an eventual cure for idiopathic pulmonary fibrosis;

(2) supports the work of advocates and organizations in educating, supporting, and providing hope for individuals who suffer from idiopathic pulmonary fibrosis, including efforts to organize a National Idiopathic Pulmonary Fibrosis Awareness Week;

(3) supports the designation of an appropriate week as National Idiopathic Pulmonary Fibrosis Awareness Week;

(4) welcomes the issuance of a proclamation designating a National Idiopathic Pulmonary Fibrosis Awareness Week;

(5) congratulates advocates and organizations for their efforts to educate the public about idiopathic pulmonary fibrosis, while funding research to help find a cure for this disorder; and

(6) supports the goals and ideals of National Idiopathic Pulmonary Fibrosis Awareness Week.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from

Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution now under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in strong support of H. Con. Res. 182, recognizing the need to pursue research into the causes, treatment and eventual cure for idiopathic pulmonary fibrosis, IPF, supporting the goals and ideals of National Idiopathic Pulmonary Fibrosis Week, and for other purposes.

IPF is a debilitating and generally fatal disease which afflicts more than 128,000 Americans, with more than 48,000 new cases diagnosed each year. IPF is often undiagnosed or misdiagnosed and is a disease marked by progressive scarring of the lungs, causing an irreversible loss of the lung tissue's ability to transport oxygen.

The legislation before us today recognizes the need to pursue research into the causes of IPF. H. Con. Res. 182 expresses support for the work of advocates and organizations in educating, supporting and providing hope for individuals who suffer from the disease and supports the designation of National Idiopathic Pulmonary Fibrosis Awareness Week.

This is an important piece of legislation, and I would like to commend my colleague and friend Mr. DEAL for all of his hard work on this issue. I urge my colleagues to join me in support of this resolution.

Madam Speaker, I reserve the balance of my time.

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

Madam Speaker, I join my colleague from Wisconsin in urging the support of H. Con. Res. 182 and at the outset commend our colleague Mr. DEAL from Georgia for introducing the resolution.

We all knew and remember Charlie Norwood who served in this House with honor and distinction, and those who knew Charlie Norwood well knew he was a fighter, passionate about his constituents, his belief, and passionate about this country, and many fights he won. But the fight he did not win was when he was diagnosed with a serious lung disorder in 1998 called, shortly, IPF.

He received a single lung transplant but passed away in February of this year and for that we miss him.

IPF is a progressive and generally fatal lung disease. It's marked by de-

bilating scarring of delicate lung tissue and hinders the lungs' ability to transport oxygen to vital organs. 40,000 people, 40,000 Americans will die this year from IPF, and there's no cure or treatment for this debilitating irreversible disease. Far too many of those with IPF face severe disability or death within a few short years, and we saw that progression here with our colleague Mr. Norwood.

The purpose of this resolution is to bring awareness to the severity of this devastating disease. Additionally, the resolution will support the goals of the National Idiopathic Pulmonary Fibrosis Awareness Week and encourage the work being done by the Coalition for Pulmonary Fibrosis and partner organizations in educating the public about IPF.

40,000 people die in a year, Madam Speaker. We should do what we can to bring attention and education and awareness to ensure it doesn't happen.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am delighted to yield 5 minutes to my friend and colleague from Washington State (Mr. BAIRD).

Mr. BAIRD. Madam Speaker, I thank the gentlelady, and I thank my colleague from New York as well.

My colleague from New York did a very nice job of honoring our dear friend Charlie Norwood who perished of this disease. My interest comes from the fact that my father died of the disease, and I want to also talk about MIKE CASTLE who has been a strong supporter of this legislation. Mike lost a sister and a brother to this disease.

What I would share with people is imagine getting a diagnosis for a disease you may never have heard of, for which there is no known cause and no known treatment, but it will be fatal. That's IPF, and as the gentleman from New York pointed out, it is estimated that the deaths, at least by some sources, that the deaths caused by IPF on an annual basis exceed the number of breast cancer deaths in this country. But my understanding is NIH currently allocates about \$14 million total to research on IPF.

So we have a disease that is growing in prevalence, that is fatal, that we have no known cause and no known cure of, and it has claimed the life of one of our dear colleagues here and the family members of Members of the Congress. That's why we've introduced this resolution.

I want to commend families and friends from the Coalition for Pulmonary Fibrosis who were here a couple of weeks ago on Capitol Hill lobbying in support of this legislation. I'm pleased to see our leadership bring this up.

We would hope that this is a first step. Our hope is that by increasing the awareness of our colleagues here in Congress and of the American public that we can not only increase awareness of the disease but begin to work

towards actual dedicated funding for this.

This is a cruel illness. Anyone who has seen a family member suffer from it has seen the actually rather desperate effort to try to simply breathe, and that's what happens when your lungs scar up and one goes from a stage of diagnosis where you have a little shortness of breath. Then you begin to need oxygen, to then you flat just cannot breathe and you die of this thing. There are a host of other complications that happen along the way that are not particularly pleasant, to say the least.

So I want to urge my colleagues to support this resolution, and I would urge them to look forward to ways that we can actually do more to actually identify the causes. There is believed to be some genetic component. I know of one woman who has had five family members die of the same illness. We don't know whether that is the cause of all cases. We don't know how it's passed on.

But this is the kind of illness that is killing a number of our friends, now one of our colleagues and many family members of Members of Congress right here. So I urge my colleagues to support the resolution.

I thank the gentleman from New York. I thank the gentlelady from Wisconsin, and I particularly want to commend NATHAN DEAL who was one of Charlie Norwood's closest friends. It's very personal for NATHAN. Obviously, it's personal for myself and MIKE CASTLE. I would urge passage, and I thank the gentlelady.

Mr. FOSSELLA. Madam Speaker, let me just in closing commend Mr. BAIRD for his advocacy. I can only imagine what it meant to him and his family in seeing the passing of his dad from this dreaded illness.

So in his honor and that of Mr. CASTLE, Mr. Norwood and especially practically 40,000 fellow Americans, it's so important to solve the problem, to acknowledge it exists, and become aware and educated on how to solve it.

Let's not just acknowledge and become more aware, but give the resources and funding and support those who ultimately want to find a cure.

Madam Speaker, with that, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, I think my colleagues have most eloquently made the case for support of this resolution.

IPF is a debilitating disease and increased awareness will certainly move us closer to finding the answers to the many unanswered questions surrounding IPF.

Again, I commend my colleague Mr. DEAL for his authorship and urge passage of this resolution.

Madam Speaker, I yield back the remainder of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 182.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Ms. BALDWIN. Madam 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, further proceedings on this motion will be postponed.

EXPRESSING THE SENSE OF THE HOUSE OF REPRESENTATIVES WITH RESPECT TO DIAMOND-BLACKFAN ANEMIA

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 524) expressing the sense of the House of Representatives with respect to Diamond-Blackfan Anemia, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 524

Whereas Diamond-Blackfan Anemia ("DBA") is a rare genetic bone marrow failure disorder affecting children and adults, 90 percent of whom are younger than 1 year of age when they are diagnosed, and results in severe anemia due to failure to produce red blood cells;

Whereas individuals and families suffering with rare diseases such as DBA not only face the challenges of their debilitating and life-threatening diseases, but must also confront the consequences of their rare disease status;

Whereas individuals suffering from rare diseases need access to treatment options and the potential for a cure;

Whereas research is proving the study of complex, rare diseases such as DBA yield tremendous advancements in other, larger disease areas that affect millions of Americans;

Whereas the children living with DBA have an increased risk of leukemia, solid tumors, and complete bone marrow failure, and 50 percent of patients with DBA are born with birth defects including abnormalities to the face, head, upper arm and hand, genitourinary, and heart with 21 percent of affected patients having more than 1 defect;

Whereas the study of DBA will yield the true incidence of aplastic anemia, myelodysplastic syndrome, leukemia, and the predisposition to cancer in DBA and will serve as an important model for understanding the genetics of birth defects;

Whereas treatments for DBA, including the use of steroids (such as prednisone) and blood transfusions, have potential long-term side effects, including osteoporosis, impaired growth because of the steroids, diabetes, and iron overload because of the transfusions;

Whereas the only cure for DBA is a bone marrow transplant, a procedure that carries serious risks and, since most patients lack an acceptable donor, is an option available for only about 25 percent of patients;

Whereas rare diseases, such as DBA, benefit greatly from well-established comprehensive care centers such as the DBA Comprehensive Clinical Care Center at Schneider Children's Hospital in New Hyde Park, New York (the "Center"), which has become the multidimensional hub for the care and treatment of DBA patients across the country, as well as the home of the DBA Patient Registry which has become a valu-

able national resource for investigators utilizing the Center to accomplish research in a multitude of areas not specific only to DBA;

Whereas the successful establishment of the Center became a model for how to diagnose, treat, and improve the lives of patients with rare diseases, while learning from the disorder to yield advancements in other areas of disease research;

Whereas the success of the initial Center prompted the Centers for Disease Control and Prevention's DBA Public Health Outreach and Surveillance Program to establish 3 additional DBA Centers in Texas, California, and Massachusetts to further patient access to information, treatment, and care by DBA experts, which has resulted in a doubling of patient care visits for DBA care and surveillance since their establishment;

Whereas the DBA Public Health Outreach and Surveillance Program at the Centers for Disease Control and Prevention ("CDC") has resulted in the completion of the first CDC brochure for the DBA patient population, the introduction of a DBA hotline and dedicated DBA nurse, and has resulted in a 25-percent increase of enrollment of DBA patients into the DBA Patient Registry in the first 2 years of the program;

Whereas the collaboration between the National Institutes of Health and the Centers for Disease Control and Prevention and their close collaboration with the Daniella Maria Arturi Foundation and the DBA Foundation have driven the many recent successes in the DBA field and serve as a model for addressing rare disease research efforts through close public and private collaboration to achieve the highest levels of success in the areas of improved patient care and disease research;

Whereas the interagency collaboration achieved within the National Institutes of Health between the National Heart, Lung, and Blood Institute, the National Institute of Diabetes and Digestive and Kidney Diseases, the National Cancer Institute, and the Office of Rare Diseases to advance the research and understanding of DBA has resulted in significant advancements not only in the DBA scientific arena, but in understanding its many links to more prevalent disorders; and

Whereas the DBA research initiatives have already yielded tremendous success including the discovery of 2 ribosomal protein ("RP") genes and the identification that DBA is the first human disease linked to a ribosomal protein problem which, as a fundamental unit of cellular function, has been implicated in a wide range of human disorders including cancer, making this discovery a profound example of the additional benefits that may result from the study of DBA: Now, therefore, be it

Resolved, That the House of Representatives—

(1) recognizes that the identification of Diamond-Blackfan Anemia ("DBA") may advance the understanding of DBA, identify implications of cancer predisposition, and serve as an important model for understanding human development and the molecular basis for certain birth defects;

(2) recognizes the importance of comprehensive care centers in providing complete care and treatment for each patient, leading to an increase in correct and early diagnosis;

(3) commends Schneider Children's Hospital for providing the first DBA Comprehensive Clinical Care Center for patients across the country, for developing the DBA Patient Registry which has proven a robust surveillance tool to understand the epidemiology, biology, and treatment of DBA, and for providing a valuable resource for investigators at a national level, working to understand DBA's

link to more prevalent disorders facing Americans;

(4) commends the Daniella Maria Arturi Foundation and the Diamond-Blackfan Anemia Foundation for their efforts to facilitate the successful collaboration among the National Institutes of Health and the Centers for Disease Control and Prevention to achieve a successful multidisciplinary approach between clinical and scientific DBA efforts with the goal of shortening the life cycle of success realized between the laboratory and applied patient care; and

(5) encourages research efforts to further understand ribosomal protein deficiencies in rare inherited diseases and to advance the treatment options available to those with DBA.

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

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as may consume.

I rise in support of H. Res. 524, expressing the sense of the House with respect to Diamond-Blackfan anemia, DBA.

DBA is a rare genetic bone marrow disorder affecting children and adults, 90 percent of whom are younger than 1 year of age when they are diagnosed. DBA results in severe anemia due to the failure to produce red blood cells. The symptoms may vary greatly, from very mild to severe and life-threatening. Unfortunately, because DBA is a rare disease, there is limited research being done, and treatment options are not optimal.

The resolution before us today as amended expresses the sense of the House of Representatives that we should encourage further efforts to clarify the natural history of DBA, continue efforts to raise awareness and ease access of information about DBA, encourage research efforts that will advance treatment options and seek a cure and encourage cross-institutional research initiatives to study the intricacies involved in this rare inherited disease.

This is an important piece of legislation, and I would like to acknowledge and thank my colleague Representative CAROLYN MCCARTHY for her hard work and dedication on this issue. I urge all of my colleagues to join me in support of this legislation.

Madam Speaker, I reserve the balance of my time.

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