

8/23/58

Speaker

RHODE ISLAND LEADS WAY IN VITAL HEALTH PROGRAMS SAYS FOGARTY WHO AUTHORED LAWS

Second District Congressman Cites Rhode Island Neurological And Cancer Projects In Review Of National Health Legislation In Congress

Mr. Speaker: As the Eighty-fifth Congress comes to a close I want to thank my colleagues in the House of Representatives and the Senate for the fine support they have given to the legislation affecting the health and well-being of the American people which I introduced in the Congress during the past year. I want to thank them because I am completely confident now as I was when I proposed the various pieces of legislation that the ends they seek will result in longer life and better life for our citizens.

Perhaps the most important bill I brought before the Congress this year was the annual appropriation for Labor/Health, Education and Welfare. In that legislation funds are provided for research and training and the construction of facilities in the various categories of health the federal government supports by direct appropriations. In each of the twelve years that I have brought this bill to the Congress, as chairman of the Health Subcommittee on Appropriations or as the ranking minority member of the subcommittee, you have been very understanding of the message I have tried to convey and you have responded well to the requests I have made for increases in funds. This year you were particularly cooperative for in final form I brought before you a bill which proposed to increase the appropriations for the National Institutes of Health from \$211 million to \$294 million. You accepted my recommendations and

as a result of that 40% increase, more research will be done in this coming year than ever before in cancer, mental health, heart disease, dental health, arthritis and metabolic diseases, allergy and infectious diseases and neurology and blindness. I would like to remind you of the considerations which impelled me to ask you for this large increase and of the hope it brings for the future in finding a solution to the killing and crippling diseases of mankind.

The first item of the budget of the National Institutes of Health is general or basic research. This is research in the sciences such as biology, chemistry, zoology, physiology, pharmacology, biochemistry, radiobiology, and other basic sciences which we must know more about in order to make real strides in the categorical fields of cancer, heart disease and the others. Last year, for general research, the Congress had appropriated \$14 million. I asked you to approve almost \$29 million, which you did. The significance of that increase is that every categorical field, every disease area in medicine will be assisted in its basic and fundamental understanding. This research is the kind of research that gives clues to the specialists in the other fields and makes it possible for these specialists to discern and pinpoint the faults and deficiencies in the human system that makes it prey to the diseases we know by familiar names. This is the first year that we have had a sizeable increase in the appropriation for general research. I shall come before you again early next year and I will be able to report then the avenues of approach that are newly opened in the categorical disease fields as a result of this appropriation. I am confident the report will be a rewarding one.

In the field of cancer last year we appropriated \$56.4 million. This year I asked you to approve \$75.2 million, which you did. In the report I submitted on the floor of the House in presenting the Appropriations Bill, I said on behalf of my subcommittee: "A few years ago a test for cancer involving study of cells was an experimental laboratory technique. Now this

cytologic test is being used for mass screening in ten centers throughout the nation. The technique is approaching the point where it can be used as a routine public health diagnostic procedure. At the moment this test is used for cancer of the uterus but studies are now in progress to determine whether it cannot be effectively used on a large scale to detect in the early stages cancer of the lung, bladder, bowel and prostate gland. With the methods of treatment now available, a simple and accurate method of early diagnosis would save many thousands of the more than a quarter of a million people who die each year from cancer."

My own state of Rhode Island was one of the first in the nation to establish a cancer detection center for cytologic testing of women as a result of this program. With the support of the Public Health Service and the collaboration of the Rhode Island Medical Society and the Rhode Island Society of Pathologists, our state Department of Health is, for the third year, making the cytologic test available to all women over twenty in the state. There are almost a quarter of a million women over the age of twenty in Rhode Island who may receive the test through a hospital, a private physician, or one of the state-sponsored cancer detection centers. For the great majority it will mean peace of mind and relief from needless worry. For those who have cancer, it will mean discovery at a time when the disease can be treated effectively and fatal consequences forestalled. I am glad this service is possible in Rhode Island by means of the national cancer program and I intend to make sure that the funds are provided each year to make it and keep it the best in the nation.

I was pleased to learn the other day that the Metropolitan Life Insurance, in a report this week, stated that cancer deaths among women had dropped 15% over the past 15 years. One favorable factor in the feminine showing, says the report, was a large reduction--27%--in mortality from cancer of the reproductive organs. "This improvement", says the report, "undoubtedly reflects

the effect of preventive measures, including advances in obstetrical practice and of early diagnosis and treatment." This is something which had been testified to by witnesses before my subcommittee for several years. I had relayed to you what they said and asked you to support the research to make possible the tests they described. You supported my request for those funds and now we are able to see the definite and tangible results.

Another aspect of the cancer problem was expressed by Dr. Wendell Stanley, a Nobel Prize winner, for his study of viruses. I said to you in the report that Dr. Stanley was of the opinion that, "we should assume that viruses are responsible for most, if not all, kinds of cancer, including cancer in man, and design and execute our experiments accordingly." I promised that of the increased funds my committee requested for cancer research, a considerable portion would be provided for this virus study. I also asked for an increase for an increase for cancer chemotherapy which seems to be especially promising and has proved its value over the past several years. Part of the increase provided will be used to support this program too. I can assure you that next year we will have an even more encouraging report on cancer progress than it has been our good fortune to have thus far.

In mental health last year we appropriated \$39.2 million. This year you approved the \$52.4 million I requested on behalf of my subcommittee. With these increased funds there will be a step-up in studies on schizophrenia, alcoholism, the training of general practitioners in psychiatry and the psychopharmacology program. This last program contemplates the use of pharmaceutical preparations in mental health in a manner somewhat parallel to the one used in cancer today. The cancer program is working with great success and I expect the mental health program to be stepped up substantially by this expansion.

In the field of heart disease last year we appropriated \$35.9 million, and this year you approved the \$45.6 million my subcommittee requested.

The increase in funds will be devoted to three main fields; the causes of arteriosclerosis, the causes of strokes and studies of anticoagulants. Everybody of middle-age in this country can appreciate the importance of research in this field. In fact, even the younger people who observe the effects of these illnesses in their families have a proper regard for their importance and I am sure that progress in this field will be looked on with interest across the nation.

In the field of dental health we appropriated \$6.4 million last year and this year you approved the \$7.4 million I requested for our subcommittee. While this is a relatively modest increase it will provide the means for more work on the study of heredity in dental defects and the mechanism of tooth decay as well as dental caries. This latter is particularly important in children and often foreshadows the health of their teeth for the rest of their lives.

In the area of arthritis and metabolic diseases the appropriation for last year was \$20.3 million and this year you approved the \$31.2 I recommended. That is a 50% increase in a field with a great many responsibilities which hitherto have been given scant attention. My subcommittee has urged an intensification of research in rheumatoid arthritis and the development of drugs which would be more effective in this disease than cortisone. Also provided is a program for the development of a better oral agent for use in diabetes. We are looking forward to the time when a pill taken by mouth will solve the problem for diabetics and insulin by injection will no longer be necessary. Another program we have intensified is the field of medicine which falls in the category of arthritis and metabolic diseases and is known as gastroenterology. This includes a study of ulcers, the chronic ailment that affects 10% of our entire population. It is our hope that by the intelligent application of these increased funds we can discover what causes ulcers and with that knowledge, be able to prevent them.

In ailergy and infectious diseases the appropriation for last year was \$17.4 million and this year you approved \$24.071 million. A large part of the increase here is to be devoted to a study of cystic fibrosis, a disease of children which medical men believe is in all probability a metabolic disease. They feel that there is some inherited defect in children that prevents the production of enzymes necessary to digest food and thereby produces the pitiful symptoms of the disease. Today antibiotics can stave off the pneumonia to which children with cystic fibrosis are particularly susceptible but until we know more about the disease and why it appears in some children and not in others, we must intensify our work and learn the processes and deficiencies that cause it to come about so that it may be prevented.

In neurology and blindness last year the appropriation was \$21.3 million. This year the appropriation is \$29.4 million. The increase in funds is to be divided among several studies of high priority. Of the highest priority are the infant deaths and malformations at birth which some medical men feel come about as a result of conditions affecting the mother before delivery of the child. Work on Multiple Sclerosis, Amytrophic Lateral Sclerosis, Epilepsy, Cerebral Palsy, Muscular Dystrophy and Parkinson's Disease will also be intensified.

Rhode Island is playing a key role in the nation's neurological program which I am very proud of. It is the site of collaborative investigation being coordinated by the National Institute of Neurological Diseases and Blindness in Bethesda, Maryland to study and evaluate the factors believed to bring on such diseases as cerebral palsy and mental retardation. There are 500,000 people in the United States who have cerebral palsy traceable to brain damage occurring in the year or so surrounding birth. And there are an estimated 4,500,000 Americans with mental retardation, about one-third of them children.

Brown University's Department of Biology and Psychology, through the

Institute for Research in the Health Sciences, was one of the first professional groups to join in this important collaborative study. Today the Providence Lying-in Hospital, the Rhode Island Hospital, Miriam Hospital, Emma Pendleton Bradley Home, and the Meeting Street School are all cooperating with the University in this program.

Over a five-year period, detailed records will be kept of the pregnancies and deliveries of 5,000 women in Rhode Island and the development of their babies for the first six years of life. All unusual events during pregnancy of the mother; infectious diseases, accidents, surgery or exposure to radiation; abnormal events at delivery; and illnesses in early childhood will be carefully documented. Should a neurological disorder occur later, an attempt will be made to correlate it with events of pregnancy, birth, or infancy which might possibly have caused the disorder.

Though this broad-scale attack on the crippling disorders of childhood may take ten years or longer, its implications for future and present generations are considerable. It is truly among the most hopeful and most comprehensive studies in the medical field that the Congress has been called upon to consider in my 18 years' service with that body.

The Congress also appropriated \$30 million for the construction of research facilities in accordance with the request I made of you. This is the third year in which the Congress has appropriated funds in this amount and since it is a fifty-fifty matching basis on which the funds are appropriated, at the end of the current fiscal year we will have not \$90 million worth of new research construction in the United States, but \$180 million of it. That means more and better space in which more and better research can be done.

In Rhode Island two grants were made under this program, one to Brown University of \$22,555 and one to the Rhode Island Hospital of \$25,000. The research facilities construction program has been authorized to continue for three additional years and I trust that other institutions in Rhode Island

will apply for grants and the state will be able to broaden and intensify its medical research activities. I shall certainly continue to see to it that funds are available for worthy institutions.

You also approved the request for an increase in the funds for construction of hospitals throughout the country and for diagnostic centers, rehabilitation facilities and nursing homes. These programs, stimulated by contributions of the federal government, have provided institutions through the whole country, including Rhode Island, which would never have been built otherwise and I am sure that the people of this land thoroughly support your action.

I also want to thank my colleagues for their understanding and support of several other measures I proposed. One of these, calling for a Conference on Aging, has become law. Another providing a million dollars a year for a ten-year period for training teachers to teach mentally retarded children has also become law. There are about one million mentally retarded children of school age in the United States and only about fifteen percent of them are getting the schooling they need. This law will provide the teaching facilities and the specialized training to take up a great deal of the slack in the program. It will make it possible for large numbers of the mentally retarded to become respected citizens making a contribution to the community by providing them with expert care and education in their early development.

Another bill I introduced, to provide scholarships and loans for the training of students in the sciences was not enacted itself but a bill containing the same features, sponsored by Congressman Elliott, a fellow member of the House of Representatives has now become law. I am happy to be able to report that under the terms of this legislation known as The National Defense Education Act, the state of Rhode Island will receive a four-year total of \$3,475,074.

The funds will be for student loans, equipment, guidance and testing and vocational education. The annual allotments are as follows: Fiscal Year 1959 -- \$729,840; Fiscal Year 1960 -- \$875,384; Fiscal Year 1961 -- \$915,078 and Fiscal Year 1962 -- \$954,772.

I have been impressed for a long time with the fact that we do not give enough attention and thought to our aging population. As people get older their problems change and they become acutely distressed because we have failed to recognize them as a group with special needs. We cannot begin to find solutions for these needs until we have studied the nature of the problems, state by state, throughout the country. Of course we know that they may turn on income, employment, health, housing, social acceptance and a great many other forms. But nobody yet has tried to pin down by a scientific approach what the problems add up to and, therefore, what the solutions are. That is why I proposed, in a bill to you, that a White House Conference be held, after the several states have had time to make a study of their own, so that we can pool the knowledge and experience of the different parts of the country, and having assessed the needs, then study and provide the solutions that are necessary. The bill is now law and I am confident that as a result of the conference to be held in January of 1961 we will soon have a blueprint for the care and protection of the older people in our national community.

I regret that the Congress did not enact the legislation I proposed for a five-year program of matching grants for the construction of medical, dental and public health educational facilities. Testifying in behalf of my bill, H.R.7841, I said: "Our population is growing and changing. We will have 200 million people in this country by 1970. In the years immediately ahead three-fourths of our population growth will be in the age groups that most need medical and dental care, those who are over 65 years of age and those who are under 20. Even when one takes into account such factors as the increased urbanization

of our population, the advances in the techniques of modern medicine and the gradual reduction in communicable diseases (all of which may tend to permit the physician or dentist to take care of a few more people on the average than he can today) it is abundantly evident that we are not graduating enough trained people in the health professions now to meet the needs that are predictable in the years ahead. The medical and related schools on which the nation relies are doing a splendid job but they cannot turn out many more graduates per year, per school, and still maintain their high standards. Moreover, with each year that passes, the cost of medical and dental education goes up and the ability of the schools to remain stable without new or augmented support is in ever increasing jeopardy. Yet by the year 1970 it is reliably estimated that we will need 2,000 physicians more per year than are now being produced, if we are to maintain, roughly, the same ratio of physicians to patients that we have today. I have proposed legislation which would authorize \$300 million over a five-year period to help meet this challenge. I would urge the committee to act affirmatively and immediately on the proposal which, although only a first step, has the greatest potential for meeting the needs of the nation in the years ahead. It is quite evident that the American people are threatened by inadequacies in health services and that initiative and constructive action on this matter must come from the Congress in a truly bipartisan effort."

The House of Representatives held hearings on this legislation but did not pass it. The Senate did not get around to holding hearings. However, I have been assured that as a result of the testimony on the legislation and the discussions which grew out of it that both the House and Senate will hold hearings early next year. I shall introduce legislation again at that time and expect that it will be passed by both houses and become law.

In the closing days of the session I introduced a bill to provide for the mobilization of the maximum international health and medical research resources. My colleague in the Senate, Lister Hill of Alabama, introduced the

same bill and we both had in mind bringing the subject before the American people for thought and discussion so that next year we will be able to undertake its passage and implementation. In a general way the purpose of the legislation is to pool the medical research resources of the world so that there will be a full exchange of medical information and knowledge and on one sure basis of understanding -- mutual international health -- the whole roster of nations can move forward together in concert and cooperation toward a common goal. I believe that a program of this kind will have overtones and implications far greater than the intrinsic good that will grow out of its medical advances for it will bring the nations of the world into a medium of understanding and harmony that no other program has yet been able to accomplish. I shall introduce this legislation again early next year and urge your most earnest consideration of its far-flung potentialities.

This past year has been a banner year for legislation in health. I want to thank you for the fine support you have given to all the proposals I brought before you. I am grateful for the confidence you have shown in the enactment of the legislation I have introduced. I want to assure you that I shall follow these programs with careful thought and consideration and come before you often to report on their development and to ask for whatever additional legislation is necessary to accomplish their purposes. I am convinced that there is no greater resource this country has than the health of its people and I know I can count on the cooperation of the House and Senate to preserve that resource as it has for the eighteen years that I have been a member of Congress.