

103^D CONGRESS
2^D SESSION

S. RES. 208

Expressing the sense of the Senate with respect to mammography screening to detect breast cancer in women ages 40 to 49.

IN THE SENATE OF THE UNITED STATES

MAY 3 (legislative day, MAY 2), 1994

Mr. COHEN (for himself, Ms. MIKULSKI, Mrs. HUTCHISON, Mr. GRASSLEY, Mr. STEVENS, Mr. BRADLEY, Mr. BROWN, Mr. JEFFORDS, Mr. FORD, Mr. BURNS, Mrs. MURRAY, Mr. SPECTER, Mr. REID, Mr. MACK, Mrs. BOXER, Mrs. KASSEBAUM, and Mrs. FEINSTEIN) submitted the following resolution; which was referred to the Committee on Labor and Human Resources

RESOLUTION

Expressing the sense of the Senate with respect to mammography screening to detect breast cancer in women ages 40 to 49.

Whereas breast cancer is a substantial health problem in the United States, and the leading cause of death in women between the ages 15 to 54;

Whereas breast cancer is the most common form of cancer for women in the United States, and the second leading cause of cancer death among all women;

Whereas it is estimated that in 1994 alone, over 182,000 new cases of breast cancer will be diagnosed and over 46,000 women will die as a result of breast cancer;

Whereas in 1992, 40,000 cases of breast cancer were diagnosed in women under the age of 50, of which 28,900 cases were diagnosed in women between the ages of 40 and 49;

Whereas the risk of breast cancer increases significantly after the age of 40;

Whereas mammography is recognized as a valuable diagnostic technique for screening women for breast cancer and has been proven to reduce mortality for women over the age of 50 with breast cancer;

Whereas the National Cancer Institute is the lead Federal agency for research on the causes, prevention, diagnosis and treatment of cancer, and whose statements are relied upon by health professionals and patients for critical health care decisions;

Whereas the National Cancer Institute in 1987 developed guidelines recommending that breast cancer screening begin by age 40 and consist of annual clinical examination with mammography screening performed at 1- or 2-year intervals to age 49;

Whereas, on December 3, 1993, the National Cancer Institute released a statement on breast cancer screening for women over the age of 50 that states that “there is a general consensus among experts that routine screening every 1 to 2 years with mammography and clinical breast examination can reduce breast cancer mortality by about one-third for women ages 50 and over”;

Whereas such statement departed from the earlier recommendations of the National Cancer Institute on mammography screening for women ages 40 to 49 by stating that “experts do not agree on the role of routine screen-

ing mammography for women ages 40 to 49” and that “to date randomized clinical trials have not shown a statistically significant reduction in mortality for women under the age of 50”; and

Whereas significant disagreement among experts in the field of oncology over the interpretation and accuracy of recent clinical studies on the value of mammography for women under age 50 and the recent statement by the National Cancer Institute on mammography for women ages 40 to 49 has sent both confusing and conflicting messages to women at risk of breast cancer: Now, therefore, be it

1 *Resolved*, That it is the sense of the Senate that—

2 (1) it is good public health care policy that ap-
3 propriate mammography screening be available and
4 accessible for women between the ages of 40 and 49;

5 (2) in light of the scientific disagreement re-
6 garding the value of mammography screening for
7 women between the ages of 40 and 49, it is critically
8 important that women and their doctors decide what
9 is the best course of care for the early detection of
10 breast cancer, including mammography screening;

11 (3) health plans be established in such a man-
12 ner to ensure that all women, including women ages
13 40 to 49, receive coverage for mammography screen-
14 ing that is appropriate for the early detection of
15 breast cancer;

16 (4) comprehensive health care reform include
17 adequate protection of all women, including women

1 ages 40 to 49, to ensure that all women have access
2 to coverage for mammography screening where it is
3 appropriate for the early detection of breast cancer;

4 (5) the National Cancer Institute supports ad-
5 ditional research, which may include randomized
6 clinical trials, for mammography screening for
7 women ages 40 to 49 to determine the effectiveness
8 and benefits of mammography screening for reduc-
9 ing breast cancer mortality in women under the age
10 of 50;

11 (6) the National Cancer Institute increase re-
12 search to improve imaging techniques such as mam-
13 mography, and to develop new types of early detec-
14 tion such as digital mammography, and other tech-
15 nologies that will improve early detection of breast
16 cancer in all women, especially for women ages 40
17 to 49; and

18 (7) the Public Health Service, in conjunction
19 with national and international centers, consumer
20 groups, and appropriate medical and professional or-
21 ganizations, should immediately reach a consensus
22 on the studies that should be undertaken to provide
23 information to determine the effectiveness and bene-
24 fits of mammography screening and other emerging
25 technologies for women ages 40 to 49.

