

108TH CONGRESS
1ST SESSION

H. R. 1746

To amend the Public Health Service Act to authorize the Director of the National Institute of Environmental Health Sciences to make grants for the development and operation of research centers regarding environmental factors that may be related to the etiology of breast cancer.

IN THE HOUSE OF REPRESENTATIVES

APRIL 10, 2003

Mrs. LOWEY (for herself, Mrs. MYRICK, Ms. NORTON, Mr. LYNCH, Mr. KILDEE, Mrs. MCCARTHY of New York, Mr. McNULTY, Ms. WOOLSEY, Mr. BROWN of Ohio, Mr. MCINTYRE, Mr. GUTIERREZ, Mr. HOLDEN, Mr. FRANK of Massachusetts, Mr. WILSON of South Carolina, Mr. FROST, Mr. WOLF, Mr. MCHUGH, Mr. TIERNEY, Mr. HOLT, Mr. McDERMOTT, Mr. RODRIGUEZ, Ms. BORDALLO, Mr. GREEN of Texas, Mr. BAKER, Mr. SENSENBRENNER, Mr. GORDON, Ms. BERKLEY, Mr. ROTHMAN, Mr. DAVIS of Illinois, Mr. BERMAN, Mr. NADLER, Mr. OWENS, Mr. HINCHEY, Mr. RYAN of Ohio, Mr. SCHIFF, Mrs. CAPPS, Mr. OBERSTAR, Mr. BOSWELL, Mr. OSE, Ms. SCHAKOWSKY, Mr. SIMMONS, Ms. CARSON of Indiana, Mr. SANDERS, Mr. BISHOP of New York, Mr. REYES, Mr. STARK, Mr. ACKERMAN, Mrs. MUSGRAVE, Mr. UDALL of Colorado, Mr. MEEHAN, Mr. CLYBURN, Mr. GEORGE MILLER of California, Mr. DOYLE, Ms. MILLENDER-McDONALD, Mr. WAXMAN, Mr. BASS, Mr. SHAYS, Mr. LEACH, Mr. EVANS, and Ms. DELAURO) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to authorize the Director of the National Institute of Environmental Health Sciences to make grants for the development and operation of research centers regarding environ-

mental factors that may be related to the etiology of breast cancer.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Breast Cancer and
5 Environmental Research Act of 2003”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds as follows:

8 (1) Breast cancer is the second leading cause of
9 cancer deaths among American women.

10 (2) More women in the United States are living
11 with breast cancer than any other cancer (excluding
12 skin cancer). Approximately 3 million women in the
13 United States are living with breast cancer: 2 million
14 who have been diagnosed and an estimated 1 million
15 who do not yet know they have the disease.

16 (3) Breast cancer is the most commonly diag-
17 nosed cancer among women in the United States
18 and worldwide (excluding skin cancer). In 2001, it
19 is estimated that 233,000 new cases of breast cancer
20 will be diagnosed among women in the United
21 States: 192,000 invasive breast cancer and 40,800
22 cases of ductal carcinoma in situ (DCIS).

23 (4) Breast cancer is the second leading cause of
24 breast cancer death for women in the United States;

1 approximately 40,000 women in the U.S. die from
2 the disease each year. Breast cancer is the leading
3 cause of cancer death for U.S. women between the
4 ages of 20 and 59, and the leading cause of cancer
5 death for women worldwide.

6 (5) A woman in the United States has a 1 in
7 8 chance of developing invasive breast cancer in her
8 lifetime—this risk was 1 in 11 in 1975. In 2001, a
9 new case of breast cancer will be diagnosed every 2
10 minutes, and a woman will die from breast cancer
11 every 13 minutes.

12 (6) All women are at risk for breast cancer.
13 About 90 percent of women who develop breast can-
14 cer do not have a family history of the disease.

15 (7) The National Action Plan on Breast Can-
16 cer, a public-private partnership, has recognized the
17 importance of expanding the scope and breadth of
18 biomedical, epidemiological, and behavioral research
19 activities related to the etiology of breast cancer and
20 the role of the environment.

21 (8) To date, there has been only a limited re-
22 search investment to expand the scope or coordinate
23 efforts across disciplines or work with the commu-
24 nity to study the role of the environment in the de-
25 velopment of breast cancer.

1 (9) In order to take full advantage of the tre-
2 mendous potential for avenues of prevention, the
3 Federal investment in the role of the environment
4 and the development of breast cancer should be ex-
5 panded.

6 (10) In order to understand the effect of chemi-
7 cals and radiation on the development of cancer,
8 multi-generational, prospective studies are probably
9 required.

10 **SEC. 3. NATIONAL INSTITUTE OF ENVIRONMENTAL**
11 **HEALTH SCIENCES; AWARDS FOR DEVELOP-**
12 **MENT AND OPERATION OF RESEARCH CEN-**
13 **TERS REGARDING ENVIRONMENTAL FAC-**
14 **TORS RELATED TO BREAST CANCER.**

15 Subpart 12 of part C of title IV of the Public Health
16 Service Act (42 U.S.C. 285*l* et seq.) is amended by adding
17 at the end the following section:

18 **“SEC. 463B. RESEARCH CENTERS REGARDING ENVIRON-**
19 **MENTAL FACTORS RELATED TO BREAST CAN-**
20 **CER.**

21 “(a) IN GENERAL.—The Director of the Institute,
22 based on recommendations from the Breast Cancer and
23 Environmental Research Advisory Panel (hereafter in this
24 section referred to as the ‘Panel’), shall make grants, after
25 a process of peer review and programmatic review, to pub-

1 lie or nonprofit private entities for the development and
2 operation of not more than 8 centers for the purpose of
3 conducting multidisciplinary and multi-institutional re-
4 search on environmental factors that may be related to
5 the etiology of breast cancer. Each such center shall be
6 known as a Breast Cancer and Environmental Research
7 Center of Excellence. The Panel shall oversee the peer re-
8 view process and shall conduct a programmatic review.
9 The Panel will recommend the funding criteria and mech-
10 anisms by which the grant funds shall be allocated. The
11 Panel shall make final programmatic recommendations on
12 allocation of grant funds.

13 “(b) BREAST CANCER AND ENVIRONMENTAL RE-
14 SEARCH ADVISORY PANEL.—

15 “(1) IN GENERAL.—The Secretary shall estab-
16 lish in the Institute of Environmental Health
17 Sciences the Breast Cancer and Environmental Re-
18 search Panel (hereafter in this section individually
19 referred to as the ‘Panel’).

20 “(2) MEMBERSHIP.—The Panel shall be com-
21 posed of nine appointed members and nonvoting ex
22 officio members. The Secretary shall appoint—

23 “(A) six members from physicians, and
24 other health professionals, who are not officers
25 or employees of the United States, and who

1 represent multiple disciplines, including clinical,
2 basic and public health sciences, and also dif-
3 ferent geographical regions of the country, indi-
4 viduals shall come from practice settings as well
5 as academia and other research settings. Panel
6 members should be experienced in biomedical
7 review; and

8 “(B) three members from the general pub-
9 lic who are consumer representatives who have
10 had breast cancer and who represent a constitu-
11 ency.

12 “(3) CHAIR.—The members of the Panel shall
13 select a chairman from among the appointed mem-
14 bers.

15 “(4) MEETINGS.—The Panel shall meet at the
16 call of the chairman or upon the request of the Di-
17 rector of the Institute, but not less often than once
18 a year.

19 “(c) COLLABORATION WITH COMMUNITY.—Each
20 center under subsection (a) shall establish and maintain
21 ongoing collaborations with community organizations in
22 the geographic area served by the center, including those
23 that represent women with breast cancer.

24 “(d) COORDINATION OF CENTERS; REPORTS.—The
25 Director of the Institute shall, as appropriate, provide for

1 the coordination of information among centers under sub-
2 section (a) and ensure regular communication between
3 such centers, and may require the periodic preparation of
4 reports on the activities of the centers and the submission
5 of the reports to the Director.

6 “(e) REQUIRED CONSORTIUM.—Each center under
7 subsection (a) shall be formed from a consortium of co-
8 operating institutions, meeting such requirements as may
9 be prescribed by the Director of the Institute. Each center
10 must require collaboration among highly accomplished sci-
11 entists, other health professionals and advocates of diverse
12 backgrounds from various areas of expertise.

13 “(f) DURATION OF SUPPORT.—Support of a center
14 under subsection (a) may be for a period not exceeding
15 5 years. Such period may be extended for one or more
16 additional periods not exceeding 5 years if the operations
17 of such center have been reviewed by an appropriate tech-
18 nical and scientific peer review group established by the
19 Director of the Institute and if such group has rec-
20 ommended to the Director that such period should be ex-
21 tended.

22 “(g) GEOGRAPHIC DISTRIBUTION OF CENTERS.—
23 The Director of the Institute shall, to the extent prac-
24 ticable, provide for an equitable geographical distribution
25 of centers under this section.

1 “(h) INNOVATIVE APPROACHES.—Centers shall use
2 innovative approaches to study unexplored or under ex-
3 plored areas of the environment and breast cancer.

4 “(i) AUTHORIZATION OF APPROPRIATIONS.—For the
5 purpose of carrying out this section, there is authorized
6 to be appropriated \$30,000,000 for each of the fiscal years
7 2004 through 2009. Such authorization is in addition to
8 any other authorization of appropriations that is available
9 for such purpose.”.

○