

109TH CONGRESS
1ST SESSION

H. R. 3034

To provide for research and education with respect to uterine fibroids, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 22, 2005

Mrs. JONES of Ohio (for herself, Mr. PAYNE, Mr. BUTTERFIELD, Mr. LEWIS of Georgia, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. WATT, Ms. CORRINE BROWN of Florida, Mr. VAN HOLLEN, Mrs. MCCARTHY, Ms. NORTON, Mr. CUMMINGS, Mr. MEEKS of New York, Mr. LANTOS, Mr. JEFFERSON, Mr. ISSA, Ms. JACKSON-LEE of Texas, Mrs. CHRISTENSEN, Mr. CARDIN, Ms. LINDA T. SÁNCHEZ of California, Mr. WYNN, Mr. WEXLER, Ms. WATSON, and Ms. WATERS) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To provide for research and education with respect to uterine fibroids, and for other purposes.

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 “Uterine Fibroid Re-
5 search and Education Act of 2005”.

6 **SEC. 2. FINDINGS.**

7 Congress finds as follows:

1 (1) The development of uterine fibroids is a
2 common and significant health problem, affecting
3 women, primarily of reproductive age, across all
4 ages, racial backgrounds, and socioeconomic levels.

5 (2) It is estimated that between 20 and 30 per-
6 cent of women of reproductive age have clinically
7 recognized uterine fibroids, and screening studies in-
8 dicate the prevalence of uterine fibroids in women
9 may be much higher.

10 (3) Minority women are more likely to develop
11 uterine fibroids, and through ultrasound screening of
12 African American and Caucasian women for fibroids,
13 we estimate that more than 80 percent of African
14 Americans and about 70 percent of Caucasians de-
15 velop fibroids by the time they reach menopause and
16 the tumors develop at younger ages in African
17 Americans.

18 (4) Symptomatic uterine fibroids can cause
19 heavy bleeding, pain, and reproductive problems, in-
20 cluding infertility. There is no known cause of uter-
21 ine fibroids.

22 (5) The presence of uterine fibroids is the most
23 common reason for hysterectomies, accounting for
24 approximately one-third of hysterectomies, or
25 200,000 procedures annually and 22 percent of Afri-

1 can American women and 7 percent of Caucasians
2 have hysterectomies for fibroids.

3 (6) Over five billion dollars are spent annually
4 on hysterectomies, at approximately \$6,000 for each
5 surgery.

6 (7) The Evidence Report and Summary on the
7 Management of Uterine Fibroids, as compiled by the
8 Agency for Healthcare Research and Quality of the
9 Department of Health and Human Services, held
10 that there is a “remarkable lack of high quality evi-
11 dence supporting the effectiveness of most interven-
12 tions for symptomatic fibroids”.

13 (8) Current research and available data do not
14 provide adequate information on the rates of preva-
15 lence and incidents of fibroids in Asian, Hispanic,
16 and other minority women, the costs associated with
17 treating fibroids, and the methods by which fibroids
18 may be prevented in these women.

19 **SEC. 3. RESEARCH WITH RESPECT TO UTERINE FIBROIDS.**

20 (a) RESEARCH.—The Director of the National Insti-
21 tutes of Health (in this section referred to as the “Direc-
22 tor of NIH”) shall expand, intensify, and coordinate pro-
23 grams for the conduct and support of research with re-
24 spect to uterine fibroids.

1 (b) ADMINISTRATION.—The Director of NIH shall
2 carry out this section through the appropriate institutes,
3 offices, and centers of the National Institutes of Health,
4 including the National Institute of Child Health and
5 Human Development, the National Institute of Environ-
6 mental Health Sciences, the Office of Research on Wom-
7 en’s Health, and the National Center on Minority Health
8 and Health Disparities.

9 (c) COORDINATION OF ACTIVITIES.—The Office of
10 Research on Women’s Health shall coordinate activities
11 under subsection (b) among the institutes, offices, and
12 centers of the National Institutes of Health.

13 (d) AUTHORIZATION OF APPROPRIATIONS.—For the
14 purpose of carrying out this section, there are authorized
15 to be appropriated \$30,000,000 for each of the fiscal years
16 2006 through 2010.

17 **SEC. 4. EDUCATION AND DISSEMINATION OF INFORMATION**
18 **WITH RESPECT TO UTERINE FIBROIDS.**

19 (a) UTERINE FIBROIDS PUBLIC EDUCATION PRO-
20 GRAM.—The Secretary of Health and Human Services,
21 acting through the Director of the Centers for Disease
22 Control and Prevention, shall develop and disseminate to
23 the public information regarding uterine fibroids, includ-
24 ing information on—

1 mation shall include the elevated risk for minority women
2 to develop uterine fibroids and the range of available op-
3 tions for the treatment of symptomatic uterine fibroids.

4 (b) AUTHORIZATION OF APPROPRIATIONS.—For the
5 purpose of carrying out this section, there are authorized
6 to be appropriated such sums as may be necessary for
7 each of the fiscal years 2006 through 2010.

8 **SEC. 6. DEFINITION.**

9 In this Act, the term “minority women” means
10 women who are members of a racial and ethnic minority
11 group, as defined in section 1707(g) of the Public Health
12 Service Act (42 U.S.C. 300u–6(g)).

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