

SENATE CONCURRENT RESOLUTION NO. 13

BY RAGAN, BOETTGER, GRONSTAL, WARD, TINSMAN, LUNDBY,  
ANGELO, ZIEMAN, DANIELSON, COURTNEY, DEARDEN,  
KREIMAN, STEWART, HANCOCK, and LAMBERTI  
(COMPANION TO LSB 3591HH BY UPMEYER)

A Concurrent Resolution relating to cervical cancer awareness, and recognizing efforts by the Iowa Department of Public Health and the Iowa Consortium for Comprehensive Cancer Control in promoting that awareness.

WHEREAS, after breast cancer, cervical cancer is the second most common cancer in women on a worldwide basis; and

WHEREAS, according to federal government statistics, cervical cancer is the third most common gynecological cancer among American women; and

WHEREAS, the American Cancer Society estimates that approximately 10,370 new cases of cervical cancer will be diagnosed in 2005, 3,710 of which will result in fatalities; and

WHEREAS, despite the fact that with regular and accurate screening cervical cancer is highly preventable, and that widespread screening programs have helped to reduce cervical cancer death rates, fatalities continue to occur; and

WHEREAS, cervical cancer cases in the United States are generally attributed to a lack of education, reduced access to regular cervical cancer screening, and inaccurate screening analysis; and

WHEREAS, experience indicates that increasing

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RULES & ADMINISTRATION

1 cervical cancer awareness, especially among minority  
2 women and women with lower incomes, significantly  
3 reduces the probability of mortality; and that such  
4 women are disproportionately affected by cervical  
5 cancer because they are less likely to have access to  
6 routine screenings and may lack insurance coverage;  
7 and

8 WHEREAS, approximately half of all women diagnosed  
9 with cervical cancer have never been screened for  
10 cervical cancer, and 10 percent of women diagnosed  
11 with cervical cancer have not been screened within the  
12 five-year period preceding diagnosis; and

13 WHEREAS, the median age of cervical cancer patients  
14 at diagnosis is 47, the youngest median age for all  
15 female reproductive cancers; and

16 WHEREAS, new screening technologies, including  
17 technologies approved by the federal Food and Drug  
18 Administration for human papillomavirus testing, which  
19 is the most important risk factor for the development  
20 of cervical cancer, offer new opportunities to finally  
21 eliminate this potentially deadly disease through  
22 early identification of women at increased risk; and

23 WHEREAS, leading medical organizations, including  
24 the American College of Obstetricians and  
25 Gynecologists, the American Cancer Society, and the  
26 Association of Reproductive Health Professionals, have  
27 recently updated their screening guidelines to include  
28 the technologies approved by the federal Food and Drug  
29 Administration for human papillomavirus testing; and

30 WHEREAS, women are entitled to proper cervical

1 cancer information and access to routine screening so  
2 they can be empowered to make informed health care  
3 decisions; and

4 WHEREAS, the General Assembly recognizes that  
5 through education and screening, women can lower their  
6 likelihood for developing cervical cancer and that  
7 through early detection, cervical cancer can be  
8 successfully treated after it develops; NOW THEREFORE,

9 BE IT RESOLVED BY THE SENATE, THE HOUSE OF  
10 REPRESENTATIVES CONCURRING, That the General Assembly  
11 commends and supports the Iowa Department of Public  
12 Health and the Iowa Consortium for Comprehensive  
13 Cancer Control in taking the lead in formulating and  
14 continually developing the "Changing the Face of  
15 Cancer in Iowa: A State Plan", which serves as a  
16 nationwide model of effective cancer control  
17 strategies; in updating the department's "Healthy  
18 Iowans 2010" publication to include data regarding  
19 cervical cancer in Iowa women and the evaluation of  
20 current methods used to provide Iowa women with  
21 information regarding cervical cancer, access to  
22 regular screening, and options for increasing  
23 screening accuracy; and in identifying pockets of need  
24 and priority strategies for enhancing the ability of  
25 health care providers to recommend or perform early  
26 detection services, programs, and procedures for their  
27 patients; and

28 BE IT FURTHER RESOLVED, That updates, successes,  
29 and progress reports related to the "Changing the Face  
30 of Cancer in Iowa: A State Plan" shall be presented

1 annually to the Governor, the President of the Senate,  
2 and the Speaker of the House of Representatives, and  
3 posted annually on the state of Iowa website homepage.

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