

1 HOUSE CONCURRENT RESOLUTION NO. 16
2 BY UPMEYER, DANDEKAR, MERTZ, BOAL, WESSEL-KROESCHELL,
3 TYMESON, JACOBS, HEDDENS, SMITH, LUKAN, OLDSO, N,
4 FOEGE, BERRY, KRESSIG, PAULSEN, DIX, GREINER,
5 DRAKE, and GIPP

6 (COMPANION TO LSB 3591SS BY RAGAN)
7 A Concurrent Resolution relating to cervical cancer
8 awareness, and recognizing efforts by the Iowa
9 Department of Public Health and the Iowa Consortium
10 for Comprehensive Cancer Control in promoting that
11 awareness.

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

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

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

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

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

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

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

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

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

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

1 WHEREAS, women are entitled to proper cervical
2 cancer information and access to routine screening so
3 they can be empowered to make informed health care
4 decisions; and

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

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