

for Ralph's commitment and my best wishes for his retirement. I wish him, his wife Janet, and their son, Michael, the very best in their new endeavors. My office will miss his hard work, hearty laugh and quick wit.

INTRODUCING THE ARTHRITIS
PREVENTION, CONTROL, AND
CURE ACT OF 2005

HON. CHARLES W. "CHIP" PICKERING

OF MISSISSIPPI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 2, 2005

Mr. PICKERING. Mr. Speaker, I rise today to introduce the Arthritis Prevention, Control, and Cure Act of 2005.

With more than 100 different forms, arthritis is one of the most widespread and devastating chronic diseases in the United States. These conditions are extremely costly to our health care system, our economic vitality, and erode the quality of life for nearly 70 million, or one in every three Americans who suffers from arthritis or chronic joint symptoms. It is estimated that 300,000 children are affected by juvenile arthritis, a disease with high prevalence yet widely unknown, that causes deformity, blindness and in some cases death. As the number one cause of disability in the United States, arthritis is a painful and debilitating disease affecting men, women and children alike—arthritis has no boundaries. Simple, daily tasks like brushing teeth, pouring a cup of coffee and even just getting out of bed become excruciating obstacles for millions of people with the disease.

The costs associated with arthritis are immense. The disease results in 750,000 hospitalizations, 44 million outpatient visits and 4 million days of hospital care every year. The estimated total costs of arthritis in the United States, including lost productivity, exceeds \$86 billion.

While the current impact of the disease is quite astounding, efforts now can help prevent and control arthritis for future generations. Despite myths that inaccurately portray this illness as an old persons' disease, two-thirds of those with osteoarthritis are under the age of 65. Maintaining a healthy weight and being physically active are both steps that can prevent this form of arthritis. More broadly, the pain and disability accompanying all types of arthritis can be minimized through early diagnosis and appropriate disease management.

This legislation will bring critical Federal resources to bear on a significant public health problem facing this country. This legislation will lessen the burden of arthritis on society and on individual citizens, like my constituent, Alfred Price of Brandon, Mississippi. Mr. Price has suffered from rheumatoid arthritis for more than 50 years, and I have witnessed over the years how this disease has ravaged his body.

In recent years, research into the prevention and treatment of arthritis has led to measures that successfully reduce pain and improve the quality of life for millions. This legislation would develop a National Arthritis Education and Outreach Campaign to educate healthcare professionals and the public on successful self-management strategies for controlling and preventing arthritis. To ensure

greater coordination and intensification of federal research efforts, this legislation would create a National Arthritis and Rheumatic Diseases Summit to look at challenges and opportunities related to arthritis research within all the agencies of the Department of Health and Human Services. Finally, this legislation expands research for juvenile arthritis at the National Institutes of Health through the creation of planning grants for innovative research. To address the severe shortage of pediatric rheumatologists, it creates incentives to encourage physicians to enter the specialty field through the establishment of education loan repayment and career development award programs.

Mr. Speaker, we must make the necessary investments in the fight against arthritis—our Nation's number one cause of disability. This legislation will improve the quality of life for millions of adults and children and save our nation valuable human and economic resources. I urge all my colleagues from both sides of the aisle to support this legislation and enact it in a timely manner so millions of Americans, like Mr. Price, can live life with less pain.

TRIBUTE TO THE HONORABLE
S. PAUL EHRLICH, M.D.

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 2, 2005

Ms. ESHOO. Mr. Speaker, I rise today to honor a distinguished American, Dr. S. Paul Ehrlich, who died on January 6, 2005.

Dr. Ehrlich served our Nation with great distinction as Acting Surgeon General in the Nixon, Ford and Carter administrations and as the United States Representative to the World Health Organization. He received the Public Health Service's Outstanding Service Medal, the Distinguished Service Medal and the Meritorious Service Medal. Dr. C. Everett Koop, the Surgeon General under President Reagan, said that Dr. Ehrlich "did more than anyone I've ever known for American health."

Dr. Ehrlich was among six Surgeons General who in 1994 urged Congress to ban smoking in public buildings and to enact stricter controls on secondhand smoke and the sale and advertising of tobacco. His commitment to the health of all Americans and to stopping the spread of AIDS led him to oppose a federal policy that would require minors to get parental consent before receiving contraceptives and information on birth control.

Dr. Ehrlich was born and educated in Minnesota, where he earned his medical degree. He served our Nation in the Coast Guard, and received a master's degree in Public Health from the University of California. He taught at Georgetown University, the University of Texas and the University of California. He was diagnosed with Multiple Sclerosis in 1981 and lived bravely with the challenges of his disease for more than twenty years.

Dr. Ehrlich was the devoted husband of Geraldine McKenna Ehrlich, proud father of three accomplished and loving daughters,

Susan, Paula, and Jill, and the doting grandfather of one.

It has been a personal privilege to have known the Ehrlich family for many years and to have had Jill Ehrlich Robinson as my Legislative Director and Chief of Staff. Her integrity and public service are an eloquent statement about she and her father who gave so much to better our country.

Mr. Speaker, I ask my colleagues to join me in honoring this good and great American and in extending our deepest sympathy to his family. Dr. Ehrlich's life as an outstanding physician bettered the health and the soul of our Nation.

LEGISLATION TO ESTABLISH THE
ATCHAFALAYA NATIONAL HER-
ITAGE AREA IN LOUISIANA

HON. RICHARD H. BAKER

OF LOUISIANA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 2, 2005

Mr. BAKER. Mr. Speaker, Atchafalaya refers to both a river and a large wetlands region of Louisiana; the name derives from the Choctaw hacha falaia, meaning "Long River." The river itself serves as a major tributary of the Mississippi and Red rivers, and runs through a swampy wetlands called the Atchafalaya Basin, which is about 20 miles in width and 150 in length. The Atchafalaya Basin is rich with wildlife, including three hundred bird species, as well as crawfish, shrimp, crabs, frogs, snakes, nutrias, beavers, raccoons, foxes, alligators, and black bears. Since the 18th century, Cajun fishermen and trappers have depended on the basin and river for their livelihoods and culture. Today, I rise with all my colleagues from Louisiana to offer legislation to preserve this unique area of natural, cultural, historic and recreational resource as a National Heritage Area.

This legislation will designate the Atchafalaya Trace Commission as the local coordinating entity of the Heritage Area. In 1997, the Atchafalaya Trace Commission was created by the Louisiana Legislature and was charged with planning and managing the Atchafalaya Heritage Area to help our communities save important cultural and natural resources. I support their mission to enhance the positive benefits of tourism and create a sustainable, healthy economy. I commend the Atchafalaya Trace Commission in their leadership in preservation and advocacy on behalf of the Atchafalaya Heritage Area.

Mr. Speaker, the legislation that I submit today also establishes a procedure for the voluntary inclusion of private property in the Heritage Area. I believe this is important in balancing both public and private interests in such a diverse natural and cultural area.

In conclusion, I believe the establishment of the Atchafalaya National Heritage Area will provide the direction and resources needed to maintain what the area has to offer for generations to come. I look forward to working with my colleagues in the House of Representatives to pass this important legislation.