

By: Representatives Martinson, Fredericks,
Bondurant, Barnett, Burnett, Carlton, Chism,
Clark, Clarke, Coleman (29th), Coleman
(65th), Denny, Dickson, Hamilton (6th),
Harrison, Hines, Huddleston, Jennings,
Masterson, Peranich, Rogers (14th), Scott, Stevens, Thomas, Upshaw,
Wells-Smith, Whittington

To: Rules

HOUSE CONCURRENT RESOLUTION NO. 95

1 A CONCURRENT RESOLUTION TO CREATE A SPECIAL TASK FORCE TO
2 STUDY THE PREVALENCE OF CERVICAL CANCER AND HUMAN PAPILLOMAVIRUS
3 IN WOMEN IN THE STATE OF MISSISSIPPI AND TO EVALUATE THE CURRENT
4 METHODS OF PUBLIC EDUCATION AND ACCESS TO REGULAR CANCER SCREENING
5 AND OPTIONS FOR INCREASING SCREENING ACCURACY.

6 WHEREAS, following breast cancer, cervical cancer is the
7 second most common cancer in women worldwide; and

8 WHEREAS, according to federal governmental statistics,
9 cervical cancer is the third most common gynecological cancer
10 among American women, with approximately 12,200 new cases
11 diagnosed annually, 4,100 of which result in fatalities; and

12 WHEREAS, with regular and accurate screening, cervical cancer
13 is highly preventable and although widespread screening programs
14 have helped to reduce death rates of women from cervical cancer,
15 women are still dying even with such advanced medical techniques
16 and evaluative procedures; and

17 WHEREAS, cervical cancer cases in the United States are
18 generally attributed to a lack of education, a reduction of access
19 available to regular cervical cancer screening and a lack of
20 screening accuracy; and

21 WHEREAS, experience shows that increasing cervical cancer
22 awareness among women, especially the underserved women within our
23 state, significantly reduces the probability of mortality; and

24 WHEREAS, cervical cancer disproportionately affects minority
25 women and women with lower incomes because they are less likely to
26 have access to routine screening; and

27 WHEREAS, approximately one-half of all cervical cancer cases
28 are in women who have been screened and ten percent of cases are

29 in women who have not been screened within the last five years;
30 and

31 WHEREAS, the median age of cervical cancer patients at
32 diagnosis is 47 years, the youngest median age for all female
33 reproductive cancers; and

34 WHEREAS, new screening technologies, including FDA-approved
35 testing for human papillomavirus, which is the cause of virtually
36 all cervical cancers, offer new opportunities to finally eliminate
37 this potentially deadly disease through early identification of
38 women at increased risk; and

39 WHEREAS, leading medical organizations, including the
40 American College of Obstetricians and Gynecologists, the American
41 Cancer Society, and the Association of Reproductive Health
42 Professionals, have recently updated their screening guidelines to
43 include FDA-approved testing for the human papillomavirus; and

44 WHEREAS, women are entitled to proper cervical cancer
45 information, so that they can be empowered to make informed health
46 care decisions, and access to routine screening, including the
47 most accurate methods available; and

48 WHEREAS, the Mississippi Legislature recognizes that through
49 education and screening, women can lower their likelihood for
50 developing cervical cancer, and that through early detection,
51 cervical cancer can be successfully treated after it develops:

52 NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF
53 REPRESENTATIVES OF THE STATE OF MISSISSIPPI, THE SENATE CONCURRING
54 THEREIN, That there is created a special Cervical Cancer
55 Elimination Task Force to take the lead in reviewing data
56 regarding cervical cancer and human papillomavirus of women within
57 this state and evaluating current methods used to provide women
58 with information regarding cervical cancer, access to regular
59 screening and options for increasing screening accuracy. In
60 addition, the duties of the task force shall include the
61 identification of pockets of need, priority strategies and new

62 technologies, including newly introduced therapies and
63 preventative vaccines which are effective in preventing and
64 controlling the risk of cervical cancer.

65 BE IT FURTHER RESOLVED, That the task force, in collaboration
66 with the Mississippi Department of Health, shall report its
67 findings and raise public awareness of the causes and nature of
68 cervical cancer, personal risk factors, the value of early
69 detection and prevention, options for testing, new technologies,
70 treatment costs, medical care reimbursement issues and physician
71 education.

72 BE IT FURTHER RESOLVED, That the task force shall consist of
73 three members of the House of Representatives to be appointed by
74 the Speaker of the House; three members of the Senate to be
75 appointed by the Lieutenant Governor; and one representative from
76 each of the following organizations to be appointed by that
77 organization: the Legislative Women's Caucus, the American
78 Academy of Pediatrics, the American Academy of Family Physicians,
79 the American Cancer Society and the American College of Obstetrics
80 and Gynecology.

81 BE IT FURTHER RESOLVED, That all appropriate state agencies,
82 as well as relevant professional/medical organizations may provide
83 assistance to the task force upon request of the chairperson.

84 BE IT FURTHER RESOLVED, That all legislative members of the
85 task force who are duly elected members of the Legislature shall
86 remain members of the task force until the task force reports its
87 findings and recommendations to the Legislature.

88 BE IT FURTHER RESOLVED, That the task force shall be convened
89 by the member with the most years of continuous service in the
90 Legislature, and at its first meeting shall elect a chair, vice
91 chair and such other officers the task force deems necessary.

92 BE IT FURTHER RESOLVED, That the task force shall timely
93 report its findings and recommendations, including any proposed

94 legislation, to the Legislature no later than March 1, 2005, at
95 which time the task force shall be dissolved.