Files of Christine Macy, Senior Speechwriter to the First Lady
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- HRC Speeches: Breast Cancer
  - Breast Cancer
- Reach Out and Read
  - Youth Development/After school/Violence
- City Year
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- HRC/Education Speeches
  - Youth Development/Afterschool/Violence
- HRC/The Arts
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- HRC Speeches 1998
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- HRC Speeches/Women
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- Kosovo Comic Book
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- Association of American Publishers
- Gore
- Family Reunion
- Legal Services/HRC
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- HRC Speeches—Education
- Medicare—Background
  - Health Reform
- Miscellaneous

First Lady Hillary Rodham Clinton
Remarks at the Colon Cancer Event
9/10/98

I am delighted to have all of you here...

We want to send out a loud and powerful message to the American people. Colon cancer is the second most deadly cancer there is, claiming more than 50,000 lives every year. But it is a disease we can fight and we can beat if it is detected early. Today we come together to launch a national effort to raise public awareness and promote early detection of this terrible, but preventable disease. We are here, quite simply, to help save lives. And I am delighted to have all of you taking part in this very important effort.

I am pleased that we have members of Congress here. I am very grateful for the Congressional support on this particular issue. None of us would be here today, or be so far along in our efforts to combat colon cancer, without the bravery, commitment and leadership of many people in this room.

I would like to give a very special welcome to Katie Couric, who has endured such a deep personal loss. We are all indebted to her for bringing national attention to the issue of colon cancer. And I know Katie has been joined by her family, and Jay's family, and whenever you face any kind of challenge in life, family is often who you turn to, and I know how important that has been to Katie and her daughters, and I am very grateful that all of you could be here for this set of announcements.

I also want to thank Ellen Levine, the editor-in-chief of Good Housekeeping. I told Ellen before I came in, that a few weeks ago in Moscow I participated in a women's round table sponsored by the Russian counterpart of Good Housekeeping. Good Housekeeping is working very hard to get good information to women so they can make good decisions about their lives, and this is another example of this effort to combat colon cancer.

One of the major forces behind this event today has been the National Colorectal Cancer Round table which has been building coalitions of professionals, advocates and voluntary organizations, each of which raises awareness about the benefits of early detection. I want to thank Dr Bernard Levine for his strong leadership as the chair of that coalition.

I also want to say a very special word of welcome to the many cancer survivors and their families who are here with us today. They are living proof that early detection saves lives. And to the many volunteers and advocates who work day in and day out to help us lead longer and healthier lives.

And I want to thank our corporate partners who play a critical role in helping us spread the word about colon cancer. It is fitting that we would begin our program here this afternoon by hearing from someone who has committed her life to improving the health and welfare of America's

families. I have worked with her for many many years. We both served on the board of the Children's Defense Fund, and I have relished the opportunity to work with her over the last five and a half years. She has been a key player in almost every social challenge facing this country today, and has worked toward solutions. Her national pastimes are very impressive, not on the ball field, although she did play a lot of ball, but in the record books of our nation's health. Thanks to her tireless leadership, we have a lot to show for the work we have done in the last five and a half years.

From infant mortality being at an all time low to immunizations being at an all time high, to the National Plan for Breast Cancer, to teen births dropping - there is a long list that she has worked on with the President and many of us to improve the lives of Americans. It is my pleasure to introduce my friend, and the Secretary of the Department of Health and Human Services, Donna Shalala....

Thank you Katie. Thanks for using your considerable influence by making it clear that this is not just an event today, it is the beginning of a crusade. It is the beginning, we hope, of a successful national effort that will not only increase awareness, but save lives. And we hope that everyone here, and everyone that will hear about this event will look for a way to participate and contribute to our efforts to make colon cancer something that every American hears about.

According to a new survey by the Gallup organization, that is being released today, nearly 50% of Americans over 50, those considered most at risk, but not exclusively at risk, 50% of that group has never been screened for this disease. We also know that although the cancer occurs equally in men and women, women are even less likely to be screened. Minorities are even less likely to undergo screening. So, we just have a lot of work ahead of us doing whatever needs to be done.

I hope that because we have been here at the White House here today, we have tried to give heart to people who care about their loved ones who have suffered throughout this disease, and understand there is no room left for excuses or embarrassment. Please, don't be embarrassed. Don't put off the test. Do what you can for yourself and your families.

There are survivors here today. Some of them have already been mentioned. Joan Foster is with us. She had a family history of colon cancer and she sought screening. In 1983, a polyp was discovered and removed. Since 1985 she has had periodic screenings that have been normal. Kathy Hochhauser, worried about her cancer during a screening - she has reached her five year survival period. Bob Williams discovered a cancerous polyp after a test, he is now retired and drives cancer patients to their treatments and volunteers at one of the local cancer associations.

We want as best as we can to build our strength to have as much dramatic impact as possible of what this disease does to people every single day. So we are not just here for awareness. We have some announcements to make such as the Public Service Announcement that brought people together to try and create infrastructure for this crusade.

At the federal level, I am pleased to announce the important new $10 million HHS grant from

the National Cancer Institute and the Gastrointestinal Program Project in Seattle. This money will help scientists identify new ways of determining who is at risk. At Katie said, we need different kinds of test, we need less invasive test, we need cheaper test, we need to have tests we can take anywhere, anytime - mobile clinics - however we can do it to reach as many people as possible. So I want to thank HHS and Secretary Shalala for helping us to begin the process of learning how to do that.

We also have a great deal of cooperation from the private sector as well. This PSA that we just saw is only one tool of trying to get the word out, and I am very grateful for it and for the commitment by NEC and Good Housekeeping to run versions of it. But others in the private sector are also chipping in.

American Airlines have placed a printed version of the printed PSA in its in-flight magazine, reaching as many as 2 million Americans a year. Kellogg Company USA will print public service messages on its cereal packages. American Greetings will create a prescription insert about prevention and early detection, and the National Association of Chain Drugstores will distribute that insert through their pharmacies. Other companies such as Bristol-Myers Squibb, Zeneca Pharmaceuticals, Olympus America, Smith Kline Diagnostics, General Motors and Eli Lilly have also committed to raise awareness about colon cancer among their workers.

These programs, because they are aiding people in their workplace and their communities will make a very real difference in the health and welfare not only of employees, but of the general public, and I really applaud all of these efforts. I am also pleased to announce that the American Digestive Health Foundation, a member of the round table, is launching an internet chat room on colorectal cancer, which will give consumers, cancer patients, family members, survivors and those at risk a new source of important information, and a safe place to engage in real live discussions about the issues they are concerned about.

I also want to take a moment to highlight an event that is going to take place here in Washington September 25 and 26-the largest single rally ever to focus attention on the devastating problem of cancer in America - all cancers - that affect someone we know in this room and beyond. I hope that many of you and all those who hear about this event will participate.

But you know the real hard work depends on our scientists, our physicians, our researchers and others getting the tools they need. Secretary Shalala mentioned it, Katie Couric referred to it - sitting up in the Congress right now, are proposals from this Administration to substantially increase the amount of money we are spending on cancer research. It is added to an already increased base. We are at the breakthrough point of learning about so many different kinds of cancers. I would urge anyone who cares about cancer and its devastating impacts on people in our country, to urge the members of Congress to do what needs to be done to pass the appropriation, to get the money available so that cancer researchers and scientists can do what they need to do on our behalf.

I also want to emphasize a point that Katie made. Just as with breast cancer, the highest risk group are people over fifty, and that risk increases as we age. But just as with breast cancer,

there are many victims of colon cancer under fifty. So this is a strong plea, that anyone with cancer in their family, and I would not limit it to colon cancer - anyone who is in any way at high risk - anyone who has ever had problems associated with the colon or the rectum - I would urge you to urge them to have a screening. And as we have done many times in this room before, I would urge all Americans to advocate for the coverage by their insurance companies for these tests. It is unacceptable.

We know we have a tough fight in this crusade against us. But we also know there are many markers on this road that you have traveled that show we can make progress together. I thank you for bringing your stories, your concern and your expertise to us here this afternoon. I especially thank Katie and her family. And I urge all of us not only to make this a national priority, but a personal priority, and let's pull together, let's make this crusade successful. And now I invite all of you to a reception in the foyer, and a receiving line in the Blue Room, and I invite the pres to go for their test in the Green Room.

HILLARY RODHAM CLINTON

REMARKS TO BREAST CANCER AWARENESS MONTH EVENT

THE WHITE HOUSE

OCTOBER 21, 1998

It's a great pleasure to join the President in welcoming all of you to the White House, as we come together to mark Breast Cancer Awareness Month. All of you here have been such powerful voices in the fight against breast cancer, and today, we will celebrate how far we've come in that fight -- and renew our pledge to the task before us. But right now, I want to introduce someone whose decision to take time out of his busy schedule to join us -- on this of all days -- is an indication of his commitment to this cause, and to all of you.

He wants to highlight some of the important victories we have just gained in the budget -- some of which will have a direct impact on the work that all of you do, day in and day out, to improve the health of America's women. It is a pleasure to introduce to you a person who has been a great champion for the cause of breast cancer, my husband, President Bill Clinton.

[President speaks]

I want to thank the President for that good news briefing, and again, to express my appreciation to all of you for joining us today. Think how far we've come. When I was a college student, a diagnosis of breast cancer was the equivalent of a death sentence. Today, breast cancer is at the forefront of the nation's health care agenda -- and we have made tremendous strides in preventing, detecting, and treating this disease. That progress could not have happened without the tireless work and commitment of all the people in this room.

Today, we have with us leading breast cancer advocates; researchers and scientists; corporate sponsors of the Medicare Mammography Initiative; women's health advocates; and those representing our federal agencies, and I'd like to ask the representatives from the Department of Defense to stand. I want to acknowledge as well the cancer survivors who have joined us -- who are daily reminders of how early detection can save lives.

I also want to welcome Dr. Jane Henney -- who as the President has just announced has just been confirmed as the nation's new FDA Commissioner. She's been such a strong advocate for breast cancer -- and I know we all celebrate her new position in the Administration.

A special word of thanks to our speakers this afternoon: Secretary Shalala -- whose unflagging leadership has done so much to improve the health and well-being of America's children and families; Dr. Nancy Davidson -- Director of the Breast Cancer Research at the Johns Hopkins Oncology Center, who represents the many dedicated scientists and researchers across the country who are making extraordinary strides in our fight against breast cancer.

We will also hear from Fran Visco, whose private courage and public advocacy on behalf of women with breast cancer is renowned far beyond the walls of this room. In addition to her leadership of the National Breast Cancer Coalition, she's the co-chair of the National Action Plan on Breast Cancer, and serves on the President's Cancer Panel. I'm so pleased she's just been named to the Integration Panel of the DOD's Breast Cancer Research Program.

I will never forget the day in 1993 when Fran and so many other passionate breast cancer advocates came here to the White House -- to this room -- armed with the signatures of 2.6 million Americans demanding national action on breast cancer.

Since then, the public/private partnership that grew out of that meeting -- the National Action Plan on Breast Cancer -- has worked tirelessly to reach its goal: the complete eradication of breast cancer.

Today, I'm pleased to release a report highlighting the Administration's accomplishments, and the progress we've all made together in the fight against breast cancer.

First, the Administration has taken the lead in dramatically boosting its investments in cancer research. These new funds have helped lead to historic breakthroughs -- including the identification of new breast cancer genes, and promising new treatments. The FDA has recently approved two new drugs [Herceptin and Taxol] which will help slow the spread of the disease. Another drug [Tamoxifen] has been shown to dramatically reduce the incidence of breast cancer in women at high risk for the disease. We celebrate the lives saved or prolonged by these new scientific discoveries.

Second, the Administration has expanded the availability and quality of prevention tools like mammograms. Too many women just can't afford the mammograms that could save their lives. This year, thanks to Administration leadership, Medicare began covering annual mammograms for all beneficiaries 40 years and older -- and is making them more affordable. We've also spearheaded a series of unprecedented outreach initiatives -- to make sure older women take advantage of the mammography benefits offered by Medicare.

Third, the Clinton Administration has worked hard to improve access to treatment and quality of care for women with breast cancer. The President has proposed that Medicare cover clinical trial costs -- and we are making it easier for physicians to enroll patients in clinical trials. Acknowledging the terrible and persistent racial disparities in treatment, access to care, and general health -- the Administration has proposed an initiative to address racial health inequities in six major areas -- including cancer. And Congress has taken a first step in funding this proposal. And finally, building on the valuable efforts begun at the DOD and the FDA -- the National Cancer Institute is fully integrating patients and advocates into setting the nation's research agenda.

Working together, we've brought breast cancer mortality rates down markedly here in the United States -- a decline of 4.5 percent between 1991 and 1995. And we should be proud of that accomplishment. Yet as every person in this room knows all too well -- breast cancer remains the second leading cause of cancer deaths among American women. Today, one in eight women will develop breast cancer; up from one in 20 just two decades ago. This year alone -- approximately 180,000 new cases will be diagnosed, and the disease will claim nearly half a million lives in this decade.

Clearly, we cannot rest on our accomplishments. We must instead rededicate ourselves to the task of preventing, treating, and one day curing breast cancer -- which continues to take such a terrible toll on our own lives, on our communities, and on our nation.

Toward that end, I'm very pleased to announce a number of very important new steps that this Administration is taking to build on and expand our record of progress -- in addition to the historic investment in cancer research that the President has just announced.

And here, I'd want to add my thanks to the Vice President, who has played such a privotal role in expanding these new cancer research funds. I also want to underscore that of the $388 million increase in the NIH budget -- that $40 million will be devoted to breast cancer alone.

Today, I'm pleased to announce a major new clinical trial of drugs that have the potential to reduce the risk of developing breast cancer. The trial will involve about 20,000 women at hundreds of sites across the country and Canada -- and will build on the success of previous breast cancer trials by examining two drugs which have shown promise in reducing the risk of getting breast cancer. I also want to highlight an ongoing trial at NIH that is examining the relationship between diet and disease. It's already showing that what we do -- in our daily lives -- can decrease the chance of getting cancer.

We are also launching an expanded outreach and education campaign that will help ensure that America's older women get recommended mammograms. It will build on government and private efforts that have been going since I first announced this campaign in 1995.

This year, HHS will focus particular attention on low income and minority women -- who continue to suffer disproportionately when it comes to breast cancer. And here, I want to recognize the private sector partners of the Medicare Mammography Initiative -- with special thanks to our national sponsors, Avon, Eli Lilly, and Zenecca, and our corporate supporters. [American Greetings, the National Association of Chain Drug Stores; the Food Marketing Institute; 1-800-FLOWERS; the American Association of Health Plans, Direct Selling Association, the Florida Association of HMOs, the National Community Pharmacists Association, and Pitney Bowes.]

I would also like acknowledge a number of breast cancer survivors who are with us today -- including Hazel Parego (PA-RAH-GO); Zora Brown; and Jean Camak [KA-MECK] -- a White House volunteer.

Alfreda [AL-FREE-DA] Elzie is another survivor here today. She's 47; and an African American. Unfortunately -- that means she's more at risk than many for breast cancer. Luckily, she got the last slot of the day at her church for a free mammogram, which she received from the George Washington Mammovan.

As a result of that first screening, Alfreda was diagnosed with very early breast cancer -- and was treated in Maryland -- thanks to the Breast Treatment Program paid for by the cigarette Tax. She's finished her therapy -- and is doing fine. Her story is a powerful reminder that early detection can save lives.

Stories like Alfreda's remind me that we must do a better job of getting people the treatment they need. That's why I'm so disappointed that Congress did not pass leiglsation, sponsored by Senators Jeffords and Kennedy, that would allow people with disabililies and illnneses like breast cancer to buy Medicade coverage.

I also want to recognize Jean Lynn, who I believe is also here today. She runs the breast cancer/mammogram van program that in its first two years alone has provided 4,000 screenings to women like Alfreda throughout the DC area. Those working on the frontlines in our communities to help prevent and detect cancer -- dedicated individuals like Jean -- deserve our deepest thanks and appreciation.

Today, we are facing a critical juncture in the fight against breast cancer. Our national commitment is beginning to pay off, as we witness dramatic progress against the disease.

Now is the time to push even harder. To redouble our efforts to pass a strong, enforceable Patients' Bill of Rights; to fight for laws that will end discrimination against individuals based on their genetic information; to end racial disparities that place minority women at far greater risk for dying of breast cancer; to increase access to clinical trials; and to continue to integrate advocates into planning the nation's cancer research agenda. And most importantly -- to continue to support research that builds on the dramatic breakthroughs of the past few months and years. Then -- and only then -- can we truly hope to prevent, detect, treat, and one day cure this cancer that strikes so many of America's women.

And now, I would like to introduce Fran Visco, who has done so much to bring that day closer.

FIRST LADY HILLARY RODHAM CLINTON
REMARKS AT UNVEILING OF BREAST CANCER STAMP
THE EAST ROOM
JULY 29, 1998

Welcome to the East Room and the White House. Starting this week, all Americans will be able to open up their hearts and mailboxes and help stamp out breast cancer once and for all. And when we do, it will be in large part because of the people in this room, and the people you represent all over our country.

It will be because of the Postal Service, which is delivering -- along with our mail -- a new weapon in the fight against breast cancer. I especially want to thank our new Postmaster General, Bill Henderson, for his vision and leadership; the Postal Board of Governors; the New Stamp Advisory Committee; and all the postal employees, some of whom are watching by satellite right now.

When we stamp out breast cancer it will be because of the artistry of Ethel Kessler and Whitney Sherman. And the tireless advocacy of Dr. Ernie Bodai, Betsy Mullen, and all the survivors who are standing up and speaking out to stop breast cancer and heal those it strikes. It will be because of Secretary Shalala's extraordinary leadership at the Department of Health and Human Services, starting when she convened a group to come up with a national action plan against breast cancer.

It will certainly be because of the Members of Congress -- some of whom are here today, from both the Senate and the House -- who, year in and year out have demanded that breast cancer be placed at the top of our national agenda -- where it belongs.

I want to pay special tribute to the architects of the Stamp Out Breast Cancer Act -- Senator Feinstein and Congressman Fazio. Thank you for your creativity that brought this idea to the Halls of Congress, and your dedication that helped make it the law of the land.

In fact, back in 1996, when Dr. Bodai went to his Congressman with the idea for a breast cancer stamp, he encountered a leader who has always cared deeply about finding a cure for breast cancer; someone who knows that we must continue to increase funding for all biomedical research, and someone who has always backed up these convictions with action. It is now my great honor to introduce Dr Bodai's congressman, Congressman Vic Fazio.

[*Speaking portion.*]

[*First Lady resumes speaking.*]

Thank you so much for that speech. Did she do a great job? Thank you for your

comments, but also for all you've done to help other women get the support and care and information they need to "WIN Against Breast Cancer." As I was listening to Betsy's story, I thought about her journey. I thought about the courage and commitment she demonstrated, and I thought about how far we've all traveled. I thought about all the women I know who have, themselves, fought breast cancer. I have a friend who today is having a mastectomy, and I thought about how not so long ago, the words breast cancer were barely whispered in the dark, if they were said at all.

It was a disease that women and men did not feel comfortable talking about, were ashamed of, embarrassed by. Now we can turn all of that fear and anguish into the kind of courage and commitment we saw embodied in Betsy and all of you who are here and are survivors of breast cancer, all of you who are family members of victims of breast cancer. You have helped turn that energy into a national call to action. Today, we have given something for every American to respond to that call to action. Most of us will not be the surgeons who will assist them, and nurses who will comfort them. Most of us will not be researchers or scientists in the lab making the breakthrough in genetic research. Most of us will not be senators or congressmen/women who are voting on legislation to increase funding in the battle against breast cancer.

Each of us, when we send our letters or pay our bills, can put this stamp of hope on the envelope. Every time we do, we will be contributing to the research that will reap hope and pray for our children, transform breast cancer from a daily threat to a distant memory. Every time we look at this wonderful stamp, so beautifully designed and illustrated, we can see the face of someone we know and love. We can see our mothers, our sisters, our daughters, our friends, our neighbors, our colleagues.

There are so many women who have endured what Betsy described to us. Many of the women who work for me here in the White House, many of the women who volunteer, and many of the women on the president's and vice president's staff, so many women throughout the government, so many women on Capitol Hill, so many women here in Washington -- have heard the words. But today, we know that we have an opportunity to do something to show our support in a very tangible way.

I urge all Americans to join in the fight against breast cancer. To do it in a lot of different ways -- by listening to those who were told that they were diagnosed with cancer. Call your friends and your relatives and your colleagues, and phone those who are facing chemotherapy, or radiation, or surgery. Laugh with them, go shopping -- to buy hats and wigs and scarves. Don't be embarrassed ever again to show your love and support to someone who is suffering from this tragic disease. Also make sure that you not only buy the stamp, but you tell your friends, neighbors, and colleagues to do the same. We know that we've come a long a way in our fight against breast cancer. The President has a very personal reason for urging increases in research that he has urged, the Congress has supported. He lost his mother to breast cancer after a valiant fight.

We've seen great progress in the work that is being done by government-funded research and clinical trials. The Department of Defense Breast Cancer Research Program has dramatically expanded. Women receiving Medicare can now get annual mammograms, without any deductibles. We've launched an annual campaign to educate older women about the benefits of mammography. Under Secretary Shalala's leadership, we've seen the birth and growth of the National Action Plan on Breast Cancer, a public/private partnership working towards one goal, and one goal alone: the final eradication of breast cancer.

We are facing a critical juncture in the war on cancer -- not only breast cancer, but other forms of cancer as well. Our commitment as a nation is finally beginning to pay off. We have put a lot of government dollars and private dollars and a lot of hearts into this fight against cancer.
With more invested in this critical time, we can really break through in a dramatic way on the cancer front.

We have many obstacles -- and whenever I think about obstacles, I think about my late mother-in-law. She never wanted anyone to feel sorry for her when she had breast cancer. As with every other adversity she faced in her life, she'd get up at the crack of dawn, put on her lipstick and false eyelashes and go out and celebrate life. She was a great inspiration in all of us who knew and loved her. I remember the sampler she kept by her nightstand that read: "Lord, help me to remember that nothing is going to happen to me today that you and I can't handle."

I've seen that same courage in the eyes and heard it in the voices of so many women. I hope that all of us will do whatever we can to expand coverage for Medicare cancer clinical trials, to look for new initiatives -- like this wonderful idea of a stamp -- and to fulfill the President's request for an additional 65 percent increase in cancer research.

We also have to be sure that no matter what kind of insurance policy a woman has, whether it's managed care or traditional care, she will always get the best care. When a woman is told she has breast cancer, she should know that every effective treatment is being used to help her. She and her physician should be making the decisions about her health, not a business person or a book keeper in an office hundreds of miles away.

Most importantly, if a woman with breast cancer has already embarked on a course of treatment with her doctor -- even if her employer switches insurance plans, she must still have access to that doctor she trusts. She should never have to switch doctors in the middle of her treatment, as too many women have been told in the last two years. Imagine how you would feel if you or your mother, your wife, your daughter, had developed this trust towards the doctor treating her in this life-threatening, life-altering disease -- suddenly dropped from the insurance plan, or had an employer change plans in midstream -- and that woman was told that she has to go somewhere else, with someone she does not know, and start over again. That's one of the many reasons we need a Patient's Bill of Rights.

On September 26, thousands will gather on the Mall for a march to conquer all cancers for all time. I hope you'll send letters with this stamp, telling a lot of your friends about that march.

In order to conquer breast cancer and other cancers, we need the commitment and efforts of every single person in this country. We will need the courage that has been shown by all you who are breast cancer survivors. We need the confidence that comes with knowing where to win our part in this brave fight.

I want to thank all of you who have helped bring us to this time, and urge all of us to continue to do everything within our individual power to win this fight against breast cancer for our mothers, our wives, our daughters, our friends, for ourselves.

Thank you very much.

As Prepared

FIRST LADY HILLARY RODHAM CLINTON
REMARKS FOR BREAST CANCER PATIENT PROTECTION EVENT
THE WHITE HOUSE
FEBRUARY 12, 1997

Good afternoon and welcome to the White House. In his State of the Union last week, the President called for bipartisan efforts to abolish the practice of forcing breast cancer patients out of the hospital just hours after major surgery. Today, we are gathered with some of the leaders in this effort to discuss why strong legislation on this issue is so important.

One out of every eight American women will discover that she has breast cancer in her lifetime. Each year, more than 160,000 women will have mastectomies and many more will have lymph node dissections. As any breast cancer survivor will tell you, recovering from the physical and emotional shock of a mastectomy is a long, excruciatingly painful and bewildering process, one that barely begins in the days immediately following surgery. But too often, breast cancer patients are forced to leave the hospital less than a day after surgery -- before they and their doctors believe they are physically ready.

As journalist and breast cancer survivor Linda Ellerbee said in a special segment on this issue for Lifetime television, a mastectomy is not like "getting a tooth pulled." Ellerbee's 60-second spot touched a nerve with many viewers. It generated more than 17,000 e-mail petitions protesting the short hospital stays and urging lawmakers to protect patients. I want to thank Meredith Wagner, senior vice-president of Lifetime, and Amy Langer, executive director of the National Association of Breast Cancer Organizations, who worked together to make these petitions possible. Let me also thank the women's health advocates, the breast cancer advocates and survivors, and the health care providers who are here today and helped raise awareness on this issue.

The bill we are here to support would allow a woman and her physician -- not a health plan -- to determine whether or not an extra night in the hospital is in the patient's best interest.

Let's not forget that Medicare pays for about one-third of all mastectomies in America. And by law, Medicare must cover the costs of all medically necessary care. If a doctor thinks a patient needs to stay another day in the hospital, then Medicare will pay for it. This morning, Health and Human Services Secretary Donna Shalala -- I am delighted she could be with us today -- announced that she is sending a letter to all Medicare managed plans to remind them that they must use this standard when covering mastectomies and other surgeries. The Secretary made it clear that plans may not set ceilings for inpatient treatment or requirements for outpatient treatment. Those decisions belong exclusively to a patient and her doctor.

I'm pleased that with us today are some of the strongest champions of breast cancer patients and leading voices in the effort on Capitol Hill to protect women from being forced out

of the hospital too soon after surgery. With me on stage are members from both houses of Congress and both sides of the aisle who have introduced legislation that will guarantee a woman at least 48 hours to recover in the hospital after a mastectomy and 24 hours after a lymph node dissection. This legislation is modeled after the law that was passed last year to end drive-through baby deliveries.

I'm delighted to welcome Representatives DeLauro, Roukema and Dingell; and Senators Mikulski, Kennedy and Ford. Sen. Tom Daschle, another sponsor, very much wanted to be here as well, but couldn't get away today. And I'm pleased so many of the bill's co-sponsors are in the audience today: Sen. Hollings, Sen. Bryan, Rep. Clayton, Rep. Eshoo, Rep. Fox, Rep. Furse, Rep. Ganske. Rep. Mink, Rep. Pelosi, Rep. Quinn, Rep. Rivers, Rep. Roybal-Allard, Rep. Slaughter, Rep. Thurman. [Still pending: Senator Moseley-Braun; Rep. Waters]

I thank each and every one of you for your leadership, for your commitment and for your unceasing efforts on behalf of the hundreds of thousands of women living with breast cancer and their families.

Many of these members will tell you that the fight for the passage of this bill has become a personal one. Whether it's a mother, a daughter, an aunt, a sister, a close friend, a colleague, or a constituent, every one of us has found our lives touched by breast cancer.

That is why we can't allow this issue of hospital stays to become a partisan one. It's an issue that affects too many of the women we love. It's an issue that affects all of us. Just as we united to pass the Kennedy-Kassebaum health insurance reforms, so must we again work together to end this practice. Ideally, we would not need to seek legislation to end specific troubling practices. But as long as women continue to find themselves in the nightmarish situation of leaving the hospital before they are ready to take care of themselves, then we must act decisively.

Let's not forget that the bottom line -- especially when it comes to the health of those we love -- can't be set by dollars saved and costs avoided, but in lives saved and people valued.

And we can work together not only in ensuring that all breast cancer patients receive the best care possible, we can also continue to support efforts to strengthen research and early detection. Over the past four years, funding for breast cancer research, prevention and treatment at the Department of Health and Human Services has nearly doubled -- from $276 million to $541 million. This research is bringing much new hope to patients and their families. We must continue to support the new Office of Cancer Survivorship that provides information and research for those living with cancer and for their families and caregivers. And I hope all of you will support the President's plan to provide free annual mammograms to Medicare beneficiaries, so that the women have greater access to this life-saving test.

Perhaps the best reasons why this issue and the fight against breast cancer shouldn't be a

partisan issue can best expressed by our next two speakers.

Many of you will recognize Dr. Kristen Zarfos, the Connecticut surgeon whom the President introduced in his State of the Union address. Her story also demonstrates what can happen when one person takes the time to speak out against something he or she believes is wrong. After being alerted to the problem of short hospital stays by Dr. Zarfos, Rep. Rosa DeLauro stepped forward to champion this issue. In many ways, Dr. Zarfos inspired this legislation.

Our first speaker is Connie Shorter, who works as Rep. John Dingell's district administrator. Connie will tell us what it was like to be sent home just hours after a mastectomy and why it is important for all of us to make sure that in the future, no other woman ever has to experience the same nightmare. Connie...

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release October 26, 1995

REMARKS BY THE FIRST LADY HILLARY RODHAM CLINTON AT THE NATIONAL BREAST CANCER COALITION SECOND ANNUAL GALA NEW YORK, NEW YORK

MRS. CLINTON: Thank you all. Thank you so much, Fran. You're right, I was a little put out when you picked my birthday. I grumbled, I complained, but I decided that it was much more important for me to be here with all of you, particularly those of you who are survivors. Because, birthdays are only as important as the quality of life and the opportunities we have to be with people we love and we care about and I'll be home tonight and they'll be there, so I am very honored on behalf of the President and myself to celebrate survival, to celebrate courage, to celebrate perseverance, to celebrate all those virtues and traits that bring so many of you here in this room tonight.

I'm particularly pleased to be with Patricia Duff and Ron Pearlman and salute them for their individual and corporate devotion to this cause and so many others that they have championed. I'm pleased to be with Monty and Suzie Herwitz and to have met their family tonight. I also am always delighted to see Paula Zahn who always does a wonderful job and tonight shared that personal story with us. And I was so pleased to see the three honorees accepting their awards this evening. All of them stand for the hundreds of thousands of women and families who are being honored through them because of their activism and commitment on behalf of the coalition and the cause of eradicating breast cancer.

I don't know that I could ever say quite enough about Fran Visco. She is a fearless advocate. She is someone who believes with every cell of her being that things can be better if enough people banned together to work on behalf of the common good. I happen to believe that also, and felt from the very moment I met her in Williamsburg those three years ago, now, that she was someone with whom I had a great deal in common and I am honored to be anywhere she is.

I also want to acknowledge and thank someone who is here, Dr. Susan Love, who will be speaking to you later. I know that everyone in this room appreciates her pioneering work in breast cancer treatment and prevention. But I hope you also know that she has changed the way medicine treats breast cancer. She has

taught a whole generation of medical students how to take better care of breast cancer patients. And so we owe her so much, not only for the obvious work she does with individual patients, for the extraordinary effort she has made to educate all women about issues effecting our health, but the way she has changed the medical professions attitude about this illness.

The kind of coalition that has been put together that we are honoring here has only been in existence for five years, but it has accomplished so much in a short period of time. It has literally changed and saved lives which is something not many of us can say. It has walked into the midst of grief and tragedy where children have been robbed of their mothers and we as adults have lost our own, where husbands have lost wives, where mothers and fathers have lost daughters. And walking into the midst of that, the coalition in its many forms of all the women and men who support its work, have said you too can be part of this fight. Turn your loss into an energy designed to eradicate breast cancer. Help us change the way we think about this disease. Help us find a cure. Help us prevent it. Hope has often replaced the grief and the tragedy.

I know that when my own mother-in-law went through her four years of struggle with breast cancer. What I admired most about that remarkable woman's courageous efforts, is how she found energy to keep working on behalf of breast cancer prevention and treatment, to travel when she could barely walk to make speeches, to lend her name to fund raising efforts, because she wanted so much to continue every single day to be part of the eventual solution.

We all know the frightening statistics and we all have our personal stories. We know that breast cancer is no respecter of race or ethnicity, it strips all of us down to our basic human essentials. It reminds us that, beneath the differences that we too often use to divide ourselves, one from the other, we really are all the same. We have the same hopes and dreams and aspirations, the same fears and challenges. Breast cancer has been a disease that, for too many years, was not talked about -- left on the back burner of medical research -- and not considered a disease that was as important as some others.

Thankfully, that has changed and we are making progress, but the progress must be continued. In the four short years that the national breast cancer coalition has worked to make government funding for breast cancer research a priority, we have seen an increase in the money allocated from ninety million to six hundred million dollars today. That funding addresses breast cancer on all from; from research into its causes, its genetic roots, its possible environmental connections, to the improvement of mammography, tot he development of innovative treatment and prevention strategies.

But you know because you are here, that as with so many other aspects of our life together, government can not fight this disease alone. Private support and funding are critical to keeping both advanced breast cancer research and public outreach efforts on track. Every dollar donated to breast cancer research prevention and treatment brings us years closer to the final eradication of this disease.

By your grass-roots activism, your outspokenness, your persistent lobbying, you have raised awareness about this disease and you have frightened a lot of officials into doing exactly what they should have done anyway. I hope that you appreciate the importance that this coalition has played, because even if you have a very supportive President, as you do, someone who is committed both because of his head and his heart, it is still difficult unless there is a network of activists who are constantly keeping watch to know exactly what is going on, even in the government.

As Fran mentioned, there was a moment a few months ago when it appeared that because of budget cuts and the like, that the money that had been fought so hard for in the Defense Department would be lost because it was not considered essential to our national security. The President was able to step in and put a stop to that because he had made it a priority. But it's that kind of constant vigilance that is required.

We are moving forward on the National Action Plan on Breast Cancer and it's very important that this plan stay on track as well. It has been formulated by consumers, clinicians, scientists, government officials, and other experts. It is a part now of the government, it is being implemented through the public health services office on women's health, whose director, Dr. Susan Blumenthal is here with us tonight and whom I would like to thank for her constant and vigilant watch over what happens with this plan. But each of us who care about what happens to our friends, our family members, ourselves must remain vigilant.

If I have any message this evening, in addition to congratulating all of you and thanking you for your efforts, it would be to please ask you to give as much attention and energy as you can in the coming weeks and months. To being sure that the gains that have been made on behalf of breast cancer and medical research, prevention, and treatment will continue.

I am worried about the cutbacks in medicare and what that will mean in the decrease in the accessibility of older women to mammograms and to clinical visits. I am worried about the cutbacks in Medicaid and what that will mean to poor women who will not have access. I have met too many women, who, as Fran said, are cut out of our existing health care system. I've had

women tell me that at their annual check-up, which they paid for out of their own pocket because they had no insurance, their doctor found a lump, referred them to a surgeon, where they were told that because they didn't have insurance, it should just be watched for a while.

I've been at breast cancer awareness meetings like the one I attended in San Diego, where I was trying to encourage older women on Medicare to take advantage of the medicare benefits to have mammograms, when a woman stood up in the back of the room and said: I'm only sixty, I don't qualify for medicare, I still work, I have no insurance, I have a lump, what can I do? So I worry about whether we will be taking one step forward with respect to the prevention and research and two steps back with respect to affordability and access for women.

We all have to be vigilant, because as we continue this fight against breast cancer, we know that there will be many competing considerations. There will be other diseases, there will be other needs that people have, and as we watch the budget battles that are going to be engaging the Capitol and Washington, and the capitols around the country, we have to be sure that women's health and diseases like breast cancer are not once again relegated to the back of the concerns where, for too long, they were.

I also want to say that I am particularly worried about the impact on women in minority communities who are already less likely to seek treatment, less likely to be able to afford it, and I was pleased to see the honorees this evening who, in their own way are working to reach out to women across the board in every community. But we have to speak out, about what budget cuts and budget priorities mean in real people's lives. Behind the statistics and all the numbers, are women, women who need treatment, women who need care, women who need the kind of work that you are doing so that the disease can be prevented.

This is not a faceless disease, nor is it just a woman's disease, it is a family disease, and it's a national epidemic. The President and I will continue to do everything we can to assist the coalition in its endeavors. And I look forward to the day, very honestly, when the coalition will be disbanded because we will have a huge gathering in a much larger room where we will have Billy Joel be the warm-up act for an announcement that breast cancer, like polio, is through.

That's what we are working for. Thank you for what you are doing to make that day possible.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release October 7, 1994

REMARKS BY THE FIRST LADY
AT ST. JUDE'S CHILDREN'S CENTER
MEMPHIS, TENNESSEE

MRS. CLINTON: Thank you so much, Marlo, and the entire Thomas family. Thank you, Dr. Nienhuis and the entire staff of this remarkable, wonderful hospital. Thank you all who are part of ALSAC (phonetic) and the supporting organizations that make this hospital live and give life to so many children.

This is an extraordinarily emotional time for many of us, as we are here for this dedication. Sitting up on this platform and looking at the front row of patients and parents, seeing all of you who stood when the Board of Governors were introduced, when the ALSAC acknowledgements were made, makes me so proud to be an American, so proud to be here for this.

I'm also pleased to be back in this part of the country, where it does take some people (inaudible) -- across the river from my adopted state of Arkansas, and knowing that all of us here are committed not only to this hospital, but to the vision that Danny Thomas brought to it.

One cannot tour this hospital, as I have just done, (inaudible) without being reminded of the extraordinary commitment of individual men and women to do things that (inaudible) envisioned. Today is a celebration, certainly, but it is also a recognition that this remarkable institution is here because of the countless hours of dedicated effort by literally thousands and hundreds of thousands of people.

I have heard all of the stories and I've heard again today how Danny Thomas committed himself to every child's future when he began to fulfill his dream of this hospital. He had faith that when he prayed to St. Jude, his fortunes would improve. And he had faith that with those (inaudible) fortunes he would find a way to help others.

I didn't know Danny Thomas personally, except I

knew him as so many of my friends did, because of "Make Room For Daddy." I spent hours and hours in front of the one television that we had in our house, which provoked much family argument, but I think it also a lot of togetherness as we would decide what we were going to watch. And there would be lots of arguments, but there was never an argument about that show.

My father, also a conservative Republican with a huge heart, related to Danny Thomas. My brothers and I and my mother would gather around to see what happened in his household that week. We felt a personal connection because he was bigger than a character on a television program, as we learned more about what he stood for and what he was committing his life to achieve.

St. Jude's Hospital is not only his shrine to his patron saint, it is also a beacon of hope. And it is also a statement of values. No one can come to this hospital without remembering the scriptural admonitions that guide so many of our upbringings: The Golden Rule, loving thy neighbor as thyself, and realizing there is always a way to translate into action what we were taught.

Whether it be a $17 a month pledge, whether it be a large fundraiser in New York, whether it be volunteer hours, there is always a way to make good on the promises we have lived on and the blessings we have been given.

As we reflect on the extraordinary success of this hospital, as we see the survival rates and cure rates for dreaded childhood diseases improving year by year, as we visit with the fine medical staff and researchers here who are on the verge of breakthroughs, we feel so good because we know efforts are being made to fulfill the ultimate goal of this hospital; that every child will receive the care that every child needs in the face of catastrophic illness.

But I must say today that in my traveling around our country over the last twenty months, I have also walked into hospitals that could not hold out the promise of St. Jude's. Today, as I met the patients and parents, as I shook hands with nurses and doctors, you can feel a sense of (inaudible) -- are building off of a team role.

And I know from my own experience there are still too many children who cannot (inaudible) that sense of

(inaudible). I cannot tell you how many times I have seen fear and panic written on the faces of parents who don't know whether they can afford treatment for a child catastrophically ill.

I've met grandparents who had two grandchildren, both of whom suffered an attack of meningitis, one of whom lived, the other died, the sole difference being that when the one with insurance showed up at the hospital, that child was admitted, and when the other grandchild showed up, that child was sent from hospital to hospital and finally sent home with aspirin because there was no insurance and there was no eligibility for government assistance.

I've sat in the atrium of the Children's Hospital in Cleveland, talking with parents of chronically ill children who could not get insurance, but make too much money to qualify for Medicaid. And I've listened to a mother tell me that she went from place to place looking for financial help, not a handout, so her child could get the treatment that was needed only to be met by (inaudible), "You just don't understand, do you? We don't insure dying children or burning houses."

I cannot imagine how I would have felt if someone said that to me if my daughter had ever faced a catastrophic illness. I do not believe that any parent should ever have to experience that. I believe every parent should have the (inaudible) of knowing there is a St. Jude's or other medical facility always available to their children should the need arise.

That has been the guiding principle for my interest in health care reform and for the many millions of Americans who recognize the need to ensure that every child has the right to receive the health care he or she needs. St. Jude's reflects that conviction and ethos. This is the (inaudible) and all of its supporters and advocates really understand that in the eyes of every child is the future of us all.

But like any great institution, St. Jude's future depends on its continuing support from all of you who have been there and who have walked the miles, walked the miles with Danny Thomas, walked the miles with the Thomas family and will continue to do so.

As a former board member of the Arkansas Children's Hospital, I know the effort required to raise funds through private philanthropy. I also know that government support is essential, particularly when that support acknowledges there is a difference between treating children and treating adults.

And I'm proud that the federal government supports this hospital and its research through the National Institutes of Health and the National Cancer Institute.

There is not a better investment of your tax dollars than research into the future of medical cures and scientific advancements. None of this support would matter much if the people who work and serve here did not make the real difference.

As I walked through the halls that sparkle, I knew there were people cleaning who were devoted to the future of the children who came through here. As I went to the ambulatory unit and met the people caring for the children who were there for their treatment, I knew what a difference they were making.

As I met the researchers and heard them excitedly talk about the break throughs in genetic research that they are on the brink of, I knew that the real joy that this place inspires in all who enter it is rooted in the commitment of the people who work and serve here.

What ultimately matters in a life, it seems to me, is to be able to say after one has received a blessing that none of us deserve, but are given by grace to all of us, that we can look into a mirror and say we have done something to help improve life around us, because we have reached out to help.

There is not a more important way of expressing that than reaching out to help make a child's life better. That is the real measure of who we are as individuals and who we are as a society. This place stands for what is best about America. Danny Thomas's legacy (inaudible) a great challenge that we should continue always to try to meet.

And I believe as we dedicate this new patient center today, we are not only making life possible and better for the thousands of children who will go through these

doors, but we are renewing the spirit of selfless commitment, of caring and compassion, of responsibility and giving that are the real building blocks of a worthwhile civilization.

Thank you for your contributions to St. Jude's and America.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release September 19, 1994

REMARKS BY THE FIRST LADY
AT "FASHION TARGETS BREAST CANCER"
WASHINGTON, D.C.

MRS. CLINTON: Good afternoon. (Applause.) Good afternoon, and welcome to the White House. I know some of you have been here over the years, and for others, this is your first trip. I hope that you feel as welcome as we want you to. We are grateful for this event today, and we are grateful for the American fashion industry's contribution to our country.

And it is an exciting day for us here in the White House because of the events of the last 24 hours. And what better way to celebrate than to have all of you here and to be doing something as important as this?

It is a special pleasure for me to not only welcome you but to talk a little bit about what we hope to accomplish with this very exciting kick-off event. In order to understand how important this is to all of us, I think we only have to pause for a minute to consider the woman who is being honored, Nina Hyde, whom I did not have the pleasure of knowing personally, but who certainly made her mark in so many ways on so many lives.

In addition to Nina Hyde, who inspired this event and has inspired so many to commit themselves to the fight against breast cancer, I would imagine that every one of us knows at least one other person who we are honoring today silently because of her valiant fight against breast cancer, perhaps becoming a survivor, with all of the lessons that that gives to the rest of us; or perhaps someone like Nina or my mother-in-law, who lost the fight against breast cancer, but whose lessons about living and dying remain a constant inspiration to the rest of us.

We all know the grim statistics about breast

cancer. We all know how every three minutes, a woman is diagnosed with breast cancer, how now, one out of every nine women in America will be diagnosed with breast cancer at some point during her life, and how every 11 minutes, a woman dies of breast cancer, because it is the leading cause of death among women between the ages of 35 and 54.

More than 180,000 women, women of all sizes and shapes and colors and religions and ethnic backgrounds and from every region of our country, will be diagnosed this year. Over 2.6 million women are currently suffering from breast cancer, and 46,000 will die.

The statistics are troubling enough, but what brings us all together and what inspired this very exciting campaign is that for too long, except for the example and the voices of individuals, we did not do enough to combat breast cancer.

We know now that we had to redouble and retriple our efforts. And thanks to the examples of women like Nina Hyde and her many friends and thanks also to scientists and researchers and medical doctors like Dr. Mark Lippmann and his team at Georgetown and thanks also to an Administration with leadership like Dr. Susan Blumenthal and others, who believes that breast cancer is a disease that must be combatted as vigorously as we can possibly do so, we are slowly beginning to make progress.

Last October, when leaders of the National Breast Cancer Coalition met with the President here at the White House, they pushed for a national action plan on breast cancer. That is something that the President had promised during the campaign. It is something that I personally felt very strongly about, based on my own work and my own contact with friends and other women who often waged a lonely battle against this disease.

We have since then established such a conference and created such a plan. We now have a frame work in place. We have increased dramatically the amount of money spent on research into this disease. We have also increased research into the technology that can help diagnose it and treat it in its current stages.

That is one of the reasons why many of us were and remain so committed to health care reform, because we know

that for every research breakthrough, there will be women who will not be able to access that research. We know that despite remarkable discoveries like that of the BRAC-1 gene last week, that millions of women will be left out of those breakthroughs without guaranteeing that every woman has access to quality health care.

As I have worked on behalf of health care reform, I have a movie in my mind. The movie is of the faces and stories of men and women and children all over our country. One of the faces is that of a woman whom I met in New Orleans, a woman who had worked at the same job for more than 15 years, a woman who took care of herself, paid out of her own pocket for a yearly physical because she could not afford insurance and did not have it through her workplace, a woman who when she had her annual physical, was told a lump had been discovered in her breast and was referred to a surgeon.

But when the surgeon found out she did not have health insurance, he told her that they would just watch the lump instead of taking a biopsy of it, because she could not afford the biopsy. That woman, like many women around our country, was left not knowing; in many ways, a fate that befalls to many in our health care system today, who even despite their own best efforts, cannot achieve the health care that would save a life or possibly minimize the damage of a disease.

So in order to make progress against this disease, we must move on many fronts. We must move as you are moving, led by the fashion industry, to continue to raise awareness and to continue to raise funds, so that we can combat breast cancer. We must move on the scientific and research front, and we must move on the governmental front, so that breast cancer is a disease that we all can feel we are contributing toward the cause of and also toward the amelioration of, by making sure that we have leadership in our public and private sector that is dedicated and compassionate and understands what this disease means in the lives of women.

Probably no industry understands women better. As I've told some of our guests, I've never seen the women in the White House get more dressed up. (Laughter.) People were making mad phone calls around town, borrowing things, trying to do their best. Even though they may not even see you, they know you are here. (Laughter.)

I was particularly touched and moved by the stories I've read about Nina Hyde calling in columns from Tibet, befriending people in the industry, taking care of her assistants at the Post. And we are honored to have Kay Graham with us, who really has helped to spearhead this work on behalf of Nina Hyde and the Georgetown Center. And we are also pleased to have Nina's daughters and her husband with us, people who knew her well and still miss her.

But I was particularly moved by learning that Nina Hyde always felt well-dressed with a swatch watch. I went through my closets and drawers looking for a swatch watch. I mean, after you've been on the worst dressed lists of People magazine, you will look for anything that can possibly give you some surcease from that.

But I don't have a swatch watch, but I have something even better. I have the honor and pleasure of introducing one of the leaders of this effort, someone who has committed himself and his company to making sure that these T-shirts are sold everywhere and become the fashion statement, with or without a swatch watch, for every woman and, I suppose, man who we can get to wear one.

And I think we all owe him and his colleagues a great deal of thanks. So join me, please, in welcoming Ralph Lauren. (Applause.)

MR. LAUREN: Just before we came out here, I was standing out on the terrace, and Donna said, "Ralph, this look becomes you, standing on the terrace." (Laughter.) I said, "Donna, I really do like this. It feels very good."

I do want to say that I am here not for Ralph Lauren. I am here for this industry. I'm here for the Council of Fashion Designers, Fern Malase (phonetic), Stan Herman (phonetic), Donna Karan, Oscar de la Renta, Louis de Olio. I'm here for Ricky Lauren, who inspired me when I worked with Nina. I'm here for Kay Graham, who has worked with us. And it was inspiring to watch her.

As I was sitting here and I looked to my left, I looked at a fellow here that might get embarrassed as I say it, a boy by the name of Jeffrey Banks, who's not a boy anymore. He's a man. And Nina Hyde introduced me to Jeffrey about 30 -- Jeffrey, is it 30 years ago, 25 years ago?

MR. BANKS: Twenty-five.

MR. LAUREN: Twenty-five years ago. (Laughter.) Believe it or not, he was in high school and graduated in my tuxedo. But he has been in this industry for these years and has had a success.

And Nina was that kind of person that would really be involved with people, no matter where you came. When you were coming into Washington -- Nina was not my best friend, but she treated every person she knew in that same way as if you were her best friend, as if she was thinking about you. And she was very intelligent and very caring about all people.

And I'm here for those reasons, but I'm here for a lot of different reasons. I guess I have had much success in my career. I've enjoyed wonderful spreads in magazines, lifestyle images of my wife and my family and all that, which are wonderful. But one of the lifestyles you did not see was New York Hospital, with bandages around my head and a person who could not walk down the hall, so weak that it didn't matter anymore.

On one hand, you're on the cover of Time magazine; on the other hand, the world is forgetting you, and you know what it feels to have that sensitivity. That type of sensitivity, I'm glad for today. I was not happy about doing what I had to do. But it does open your mind and your life to thinking about the world. I work as hard today as I ever did, but there is something extra that I carry along with me, and I'm always sensitive to what goes on.

When I met Nina, I had just come out of the hospital. I guess we had a sort of a kinship, because at that time I had seen her, she did not look too happy. And I had not seen her for a few months. And I said, "Nina, you don't look so well. Why are you not smiling?" Because she was always very gracious and very open and very -- and she really did look down. She said, "Ralph, I have breast cancer."

And I was taken by it and shocked. And I said, "Nina, what can I do?" And she said "Ralph" -- and I can remember driving along in a car with her. And she said, "It would be really wonderful if you could talk to the fashion industry about this." And I was saying to myself, "Talk to

the fashion industry? It's a big industry." The fashion industry is the largest industry in America. I said, "How am I going to talk to the fashion industry about this?"

But, you know, you can do things that you never think you could do. You can say, "It's too big; I'll never get there," or you can say, "I can get there, one by one." This did not happen overnight. We did not plan this event. This took many years of thinking and trying to do things.

Anyway, in working with Nina and talking to Nina, we did do something. And I called every designer and wrote to every designer in the world. And we got responses from everybody. And we had a cocktail party, and we raised a million dollars. Nina was alive then, and she spoke. And it was quite amazing. From nothing, we had a Nina Hyde Foundation.

And I've often asked these questions of myself, and these questions that I will have to ask you and hit you real hard. If someone said to you -- if it was your sister, your aunt, your wife, your girlfriend said, "I have breast cancer; I'm dying," what would you do? What would you do? And I would have to ask everybody out there in the world that passes notes that go by them, because we're so busy in life, all the big industries, all the big-time power men out there that are wheeling and dealing and shuffling and moving dollars all over the places, if their wife had breast cancer, and they loved their wife, would they have not paid millions to make sure she lived? Would they not have done everything in the world?

And we can say, "Beware of this terrible disease." We can say, "Let's really know about this breast care awareness." But it's not about awareness. It's about doing. It's about getting a job done. It's about motivating and getting these people to spend the money that it's going to take to really cure this disease.

We have Dr. Mark Lippmann, who I had met through Nina. Mark was just another doctor to me until I met him. And he was inspiring, because he really explained what could be done. And he explained that this is not going to be forever. Breast cancer can be cured and will be cured, possibly or maybe totally, in our lifetime.

If you know that and you're well, wouldn't it be

great to prepare for that today? Wouldn't it be great to be ready for that, so that you don't have to ever go through that?

I would like to introduce Dr. Lippmann and have him explain exactly what is being done. Thank you very much. (Applause.)

DR. LIPPMANN: Mrs. Clinton and many honored guests, it's an incredibly joy for me to be here today on this occasion. But I wish to say to begin with that I'm really not for here for myself.

I think it's essential that you recognize that I'm not here for the Nina Hyde Center, the Lombardi Center at Georgetown University, but I'm here, in some sense, for thousands of dedicated scientists and physicians around this country who have worked tirelessly towards gaining a better understanding of breast cancer and better means of treating it. And I'm also here on behalf of patients, patients that are alive now, patients that are to be, and patients who are no longer.

For the last 20 years, my entire life has been dedicated to breast cancer, and it's an incredibly overwhelming thought to know that in the United States alone in that period of time, almost a million women have died of breast cancer. It's enough to give one very, very serious pause.

And some time ago, when Nina Hyde was my patient and my friend and my colleague and, in some ways, my goad, when she knew what lay in store for her, in many ways, she did not give up. She most emphatically appreciated that much could be done. And she collared many of the people in this room, grabbed them, and wouldn't let go, got them, got their attention. When their attention wandered, she got it again. And when their attention wandered, she grabbed them again.

And because of her and other women like her, there is a great deal that we can be thankful for already in the story about breast cancer. And there are three pieces of this story that, very briefly, I would like to touch upon.

The first one that we have already talked about is awareness. But awareness isn't a vague concept when you talk about breast cancer. Awareness is human lives that need not

be lost. It is a simple fact that easily, one-third of the women who die of breast cancer in this country every year would not die with optimal care delivered equitably throughout this country with technologies and means that we have already discovered.

And certainly, when I say "awareness," I don't simply say awareness philanthropically. I say awareness from the vantage point of getting that care to people who need it, helping them understand why they need it, helping them understand that they're entitled to it, and helping them with that entitlement to get what they need for themselves.

Secondly, and extremely importantly, there has been progress made. And that progress has not come easily, but it has not come by serendipity alone. Thousands of human hours spent in the laboratory and in the clinic with women brave enough to be part of clinical trials and to face the unknown, together with their caregivers, have led to a variety of therapies that are capable of saving lives.

Drug treatments given prophylactically following surgery can improve the survival for women with breast cancer. There's no question about it. New therapies with citochines (phonetic) and new drugs clearly can increase the response rates for many women with breast cancer. And that's encouraging, as well.

Perhaps the most important message, though, that I think I can bring to you is my own personal sense of optimism and hopefulness, which is reality-based, which comes from an increased understanding of this disease.

It is simply no longer true to say that we have no idea what causes breast cancer. "It's just a terrible mystery; it's a curse." That's not true. In many cases, the specific proteins produced by breast cancers which are responsible for their behavior, for making the breast tumors grow and spread and metastasize have been discovered, are known and identified.

And in laboratories such as the ones we have in the Nina Hyde Center and throughout the country, many investigators are hard at work attempting to exploit that information with new experimental therapies. And it is unquestionably the case that some of these therapies will work. And this requires the dedication and support not only

of the United States government, for sure, of organizations like the American Cancer Society, and, critically, human beings like yourselves involved in supporting this process.

Not only is this understanding of the disease going to alter the entire face of therapy, but a great deal more can be said about what we would almost all prefer, to wit: to either prevent the disease or to detect it when the therapies need be minimal, nonmutilating, and nontoxic.

And the fact is that we finally do have insights into new approaches to breast cancer detection which can either supplant or augment mammography. There are new technologies in trial in experimental work in human beings now which have enormous prospects of discovering the disease while it is no bigger than a millimeter. Breast cancer discovered at that size is curable 95 percent of the time or more. That reduces the death rate from 46,000 to 4,000. That would be a major gain.

The will to do these studies needs to constantly be there among all of us. The financial support, so clearly flagging over the past few years, needs to be re-enthused and reinfused into this process, because we do have the knowledge and the ability to get the additional knowledge to finally have an impact on this disease, which is why I say thank you on behalf of my colleagues, for your support.

Because not in some future, ephemeral time, but in the next few years, I believe that our continued support for this activity will change this disease for our children and the people we love. Thank you for your attention. (Applause.)

It's my pleasure to introduce Dr. Susan Blumenthal, who works within the system for the U.S. government. And her efforts have been extraordinarily helpful in attempting to marshal the kind of support we need to improve this pace of discovery. (Applause.)

DR. BLUMENTHAL: Thank you very much. Thank you, Mark, and Mrs. Clinton and distinguished guests.

Over the past four years, our country has witnessed the greatest focus on women's health in the history of our nation. The year 1990 marked the beginning of a decade in which alarming inequities in women's health were exposed --

the lack of women as research subjects in our nation's clinical investigations; the fact that men were considered to be generic humans, and yet the findings from these studies were extrapolated to guide the treatment of women patients; the lack of analysis of data by gender in diseases that affect both men and women, such as heart disease and cancer; the dearth of senior women scientists in our country's federal and research establishments.

These inequities are now being addressed through the Public Health Service Office on Women's Health working in collaboration with all of the agencies of the Public Health Service and other departments of government and working with consumers, health care professionals, and others.

There's an old proverb that says, "It is better to light a candle than to curse the darkness." There has been considerable darkness surrounding women's health issues in the past, but the light that has been shown on these issues by the dedicated and outstanding leadership of Hillary Rodham Clinton, Secretary Donna Shalala, consumers, health care professionals, scientists, so many of you here today has brightened the prospects for a healthier future for all American women.

Perhaps nowhere is the need to focus our energies, our resources, your art, and our science more than the problem of breast cancer, the most frightening and the most common cancer for women, a public health issue that is of highest priority to the Clinton Administration and to our Office on Women's Health.

As Mrs. Clinton mentioned, a year ago in this room, signatures of 2.6 million Americans were presented, a conference was held, and a national action plan was implemented. Our Office on Women's Health is implementing that action plan in cooperation, in collaboration with other private organizations and public sector groups. We have brought together all the agencies of government, the Department of Defense, the Environmental Protection Agency, the State Department.

We're working with consumer advocacy groups, with health care professional societies, with private industry, with all of you here today. Work with us to develop concrete actions to eradicate breast cancer as a threat on the lives of American women. And we will do that. Concrete

initiatives -- we have developed working groups with public-private partnerships on a number of issues, such as putting together a plan for counseling for this newly discovered gene that will affect 5 percent of women with breast cancer and 25 percent of women under the age of 30 with breast cancer.

We're developing and linking breast health and breast services to the information superhighway. We're developing a data and tissue resource bank, so that there will be a national registry to help researchers find the risk factors for breast cancer.

And there are many other important programs underway in our government today. And let me just highlight a few of them for you. The National Institutes of Health, under the distinguished leadership of Dr. Harold Varmis (phonetic), is the biomedical research capital of the world. One of his institutes, the National Cancer Institute, is the steward of research on all aspects of breast cancer, supporting research both in the labs of the NIH and in academic centers across the country, such as Georgetown University Medical Center.

The National Cancer Institute, under the direction of Dr. Samuel Groder (phonetic), is supporting research on the biological, hormonal, and environmental causes of breast cancer. We want to know why the rates of breast cancer have gone from 1 in 20 women in the 1960s to 1 in 8 women over her lifetime today.

While the breast cancer gene newly discovered explains about 5 to 10 percent of those cases, fully 70 percent of women have no known risk factor for the disease. And we think that 90 percent of them have some environmental factor that is interacting with normal genes to express breast cancer. We need to find out what those environmental -- preventable environmental causes of breast cancer are and change them.

Additionally, the NIH is supporting a trans NIH initiative, the women's health initiative. It has been joking called "the mother of all clinical trials," because it is the largest clinical trial ever conducted on either men or women. It is exploring the risk factors for diseases in older women, such as breast cancer, osteoporosis, and heart disease. It is exploring the effects of hormone replacement therapy, estrogen replacement therapy, on the development of

risks for breast cancer. And it is studying whether low fat diet, exercise, and vitamin supplements might be helpful in preventing breast cancer in older women.

Additionally, the National Institute of Environmental Health Sciences is looking at environmental risks for breast cancer. We know that there are particular pockets, geographic pockets that have higher rates of breast cancer in our country. We want to know whether there are pesticides, atmospheric pollutants, other factors that may increase the risk. And we know that some of these factors promote the production of estrogen in women's bodies. And there have been studies that have linked some of these factors to the increase in breast cancer rates.

Two seemingly unlikely sources of breast cancer activity are the Department of Defense and the Environmental Protection Agency. The Department of Defense is about to announce $200 million of new research money on the causes, the treatment, and prevention of breast cancer.

Additionally, the Environmental Protection Agency, again, is looking at the regulation of some of those environmental factors that have been identified and associated with increased risk for breast cancer.

The Food and Drug Administration, under the direction of Dr. David Kessler, is the agency that approves all new drugs for the treatment of breast cancer. And they are also implementing the 1992 Mammography Quality Standards Act, which is going to ensure now that there is federal certification of all mammography facilities and personnel, so that when a woman goes to get her mammogram, she knows that it's going to be safe, accurate, and reliable. The FDA seal of approval will guide women to the best mammography in their communities.

While mammography, as Dr. Lippmann mentioned, is an old technique -- it's a 40-year-old technique -- and while it can decrease the death rates from breast cancer by 30 percent for women over the age of 50, it is less effective for younger women. Surely, if we can image missiles 15,000 miles in outer space and we can use the Hubbel telescope to see those craters on Mars and Jupiter, we should be able to more accurately detect a small lump in a woman's breast right in front of us.

So my office, in collaboration with the National Cancer Institute and in cooperation with the Congressional Caucus for Women's Issues, is bringing together radiologists currently exploring MRI, magnetic resonance imaging, mammography, PET scans, ultrasound, new technologies to be applied to breast cancer, and we're bringing them together with defense imaging experts, imaging experts from the Central Intelligence Agency, from NASA, and those people who do computer graphics, those special effects that were done in Jurassic Park.

We're bringing them together to try to develop a more accurate and sensitive method for the detection of breast cancer. And what better peace dividend from our national investment in defense than to save the lives of American women? (Applause.)

All of our lives, I'm sure, have been touched in some way by this dreaded disease. I know I lost my own mother of this illness 17 years ago. I watched her be ravaged by it. We are committed in this Administration, in this government, working with all of you here today to eradicate breast cancer as a threat from all of our lives.

In closing, let me remind you of another proverb that says, "He" -- let's make that "she" -- "who has health has hope, and she who has hope has everything." That's what this Administration's efforts on women's health and the national action plan on breast cancer is all about, bringing hope for a healthier future, a future free of the threat of breast cancer to every American woman. Thank you very much. We look forward to working with you. (Applause.)

MRS. CLINTON: Well, we hope that all of the comments from the speakers have been informative and useful to you, as you launch this very exciting campaign. We now want to invite all of you to join us for a reception in the State Dining Room.

I would like to thank each of you individually, so I will be in the Blue Room -- it's the Green Room, the Blue Room, the Red Room -- to have a chance to express my appreciation on behalf of the President and this Administration for what you do all the time for our country and for women, in particular, but what you are doing now, especially, to bring attention and resources to the fight against breast cancer.

I hope that we will have an opportunity to meet on a regular basis. And Dr. Lippmann, Dr. Blumenthal, their colleagues will be able to update you and let you know how important your resources have been and your commitment is. It's an exciting challenge and one that we are determined to meet.

Thank you all very much. (Applause.)

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THE WHITE HOUSE

Office of the Press Secretary
(Sunnyvale, California)

Embargoed For Release
Until 10:06 A.M. EDT
Saturday, September 26, 1998

RADIO ADDRESS OF THE PRESIDENT
TO THE NATION

The Fairmont Hotel
San Jose, California

THE PRESIDENT: Good morning. As everyone knows, cancer can be the cruelest of fates -- it strikes nearly every family. It struck mine; I lost my mother to cancer.

Losses like these are the reason why tens of thousands of Americans are coming together today on the National Mall in Washington, D.C., with one common purpose: to focus our entire nation's attention on cancer. Gathering today are patients and survivors, families and friends, doctors and Americans from all walks of life. The Vice President, who has been a real leader in our administration's struggle against cancer, will join their ranks, and will speak about the specific steps we are taking to win the fight.

This morning I want to talk to you about our overall vision of cancer care and research as we approach the 21st century. This is a time of striking progress, stunning breakthroughs. With unyielding speed, scientists are mapping the very blueprint of human life, and expectations of the Human Genome Project are being exceeded by the day. We are closing in on the genetic causes of breast cancer, colon cancer and prostate cancer. New tools for screening and diagnosis are returning to many patients the promise of a long and healthy life. It is no wonder scientists say we are turning the corner in the fight against cancer.

For six years now, our administration has made a top priority

of conquering this terrible disease. We've helped cancer patients to keep health coverage when they change jobs. We've accelerated the approval of cancer drugs while maintaining safe standards. We've increased funding for cancer research and, as part of our balanced budget, strengthened Medicare to make the screening, prevention and detection of cancer more available and more affordable.

Still, we know that we must never stop searching for the best means of prevention, the most accurate diagnostic tools, the most effective and humane treatments -- and someday soon, a cure. To that end, there are several steps we must take.

First, to build on our remarkable progress I proposed an unprecedented, multi-year increase in funding for cancer research. As studies proceed, we must remember that patients, as much as scientists, have a critical perspective to add to any research program. That's why I'm announcing that all federal cancer research programs will, by next year, fully integrate patients and advocates into the process of setting research priorities.

Next, as we continue to unravel the genetic secrets of cancer we must apply that knowledge to the detection of the disease. I am therefore issuing a challenge to the scientific community to develop, by the year 2000, new diagnostic techniques for every major kind of cancer so we catch it at its earliest and often most treatable stage.

Also, we should give more patients access to cutting-edge clinical trials so they and researchers can get faster results. That's why I'm directing the National Cancer Institute to speed development of national clinical trials systems -- a simple, accessible resource for health care providers and patients across our nation. I'm also urging Congress to pass my proposal to cover the cost of those trials for Medicare beneficiaries who need them most.

Finally, we are fighting against the leading cause of preventable cancer by doing everything we can to stop children from smoking. America needs a Congress with the courage to finish the job and pass comprehensive tobacco legislation.

New technological tools, new networks of information, new research priorities -- all are part of our overall approach to health care that puts the patient first. On this day, as Americans from all walks of life and all parts of our nation renew our national fight against cancer, we do well to remember that we are doing more than curing a disease. We are curing the ills that disease may cause -- the stigmas, the myths, the barriers to quality care. The concerned citizens on the Mall

today show that we are overcoming those barriers, one by one, and at the same time building a stronger and healthier America.

Thank you for listening.

END

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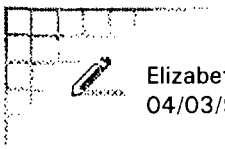

Elizabeth R. Newman
04/03/98 11:36:37 AM

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release April 3, 1998

REMARKS BY THE PRESIDENT
ON THE ECONOMY

The Rose Garden

10:08 A.M. EST

THE PRESIDENT: Thank you very much. Before I read my statement, I'd like to make a brief comment on a momentous event which occurred during my trip to Africa, back here. The Vice President turned 50, and I hope all of you noticed the increased gravity and maturity of his aura. (Laughter.) I personally am greatly relieved. Not long before he turned 50, as I told him when I called him, an elderly lady came up to me and she said, I think you and that young man are doing such a good job. (Laughter.) And it's nice to have a middle-aged team now at the White House.

THE VICE PRESIDENT: She was very elderly. (Laughter.)

THE PRESIDENT: Let me say, Hillary and I are delighted to be back from what was a wonderful trip to Africa. We are working hard to strengthen the bonds of the African continent that I am convinced is in the midst of a renaissance, where political and economic liberty is on the rise.

I only wish every American could have been with me every step of the way to see, first, Africa, not only its problems, which are profound, but the energy and intelligence and determination of the people. I also wish every American could have had yet one more opportunity to see how a very important part of the world see America -- still as a beacon of equality and freedom and hope for opportunity.

Today we learned that the unemployment rate in the first quarter of this year, averaging 4.7 percent, is the lowest it's been since 1970, 28 years. While there will be ups and downs, our economy continues to be one of the strongest in history. Over the past year we've seen the strongest wage growth in 20 years; inflation is still low; homeownership now at a record level. As we approach the longest peace-time expansion in our history, this is a springtime of hope and opportunity for the American people.

Our economy is the product of the hard work, the creativity, the innovation of our citizens, and the ingenuity and drive of our businesses. But also it is the fruit, as the Vice President said, of the comprehensive economic strategy we have pursued since 1993, a strategy for the new economy.

The coming months will now test our nation. It will determine whether we will maintain our discipline and pursue our priorities to strengthen our country for the new century. We can make this a time of action as well as a time of abundance, to secure our prosperity well into the future, to widen the circle of opportunity so that all Americans have a chance to reap the rewards of economic growth.

First, we should go and balance the budget this year and do it in a way that continues our investment in our people and their future. With projected budget surpluses of $1 trillion over the next decade, I am pleased that members of Congress of both parties have joined my call to reserve every penny of the surplus until we save Social Security first. This is very significant. I compliment the leadership of both parties. It will strengthen our nation.

At the same time, as we live within a balanced budget, we must invest to create prosperity for the future. Many times I have said that in the new economy, education is the leading economic indicator. We will continue to lead the world only if our children receive the world's best education. In that context, I am very concerned that the budget plan now working its way through the Senate will squeeze out critical investments in education and children.

I believe America must address the challenges before us. Class size for our children -- we must hire 100,000 new teachers so that we can reduce those class sizes. We must spur school modernization to make our classes smaller and our schools safer. We must invest in path-breaking scientific research that will lengthen our lives and promote prosperity into the 21st century. And we must make those investments which will make credible our call for higher standards and higher performance in our schools. The budget now being drafted by Congress simply does not meet these urgent national priorities.

I'm also determined that highway spending, though it is quite important, and though our budget provides for a very impressive increase in investment in highways and mass transit, must be -- such spending must be within the balanced budget, and should not crowd out critical investments in education, child care, health care, or threaten our budget discipline.

In the coming months I look forward to working with Congress in cooperation with lawmakers of both parties so that America stays on the path of both fiscal discipline and targeted investment -- a balanced budget that is in balance with our values and our long-term interest in the future. That is what has brought us this far since 1993. We should not depart from that strategy now.

Finally, I am determined to seize this historic opportunity to pass bipartisan legislation to protect our children from the dangers of tobacco. This Congress can be the Congress that saves millions of children's lives. I want to say that we seem to be making some progress on that, with the vote in the Senate committee, but there is an enormous amount of work still to be done. And I hope during this working recess the lawmakers of both houses and both parties will be talking to the folks back home about the tobacco legislation and will come back here at the end of this month with a renewed determination to actually pass legislation that will get the job done.

Our economy is the strongest in a generation, our social fabric is on the mend, our leadership around the world as we saw on the trip to Africa, remains unrivalled. But our history and our heritage tells us that we can do better and that our success depends upon our constant effort to do better. The American people want us to use this sunlit moment not to sit back and enjoy, but to act. We were hired by the American people to act. If we do so, in the 21st century the American dream will be more powerful than ever.

Thank you.

Q Do you have any comments on reports that Kenneth Starr is being urged to indict Monica Lewinsky and name you as a co-conspirator?

Q On the tobacco deal, sir, how concerned are you that one or more of the tobacco companies might walk away from this proposed settlement? And do you believe that you need their cooperation both so that there is money for your budget priorities and so that you can win restrictions on cigarette advertising?

THE PRESIDENT: Well, the latter is of greater concern. That is, their agreement, or lack of it, would influence the way Congress would have to raise the money, through raising the price of cigarettes to deter more consumption and to raise the funds for the health care costs of tobacco and the health research and the other things that I believe should be funded out of this settlement. But on the advertising, of course, that could be a concern because of the governing legal precedents.

But I still believe that the incentives are there for the tobacco companies to do this. With each new revelation of the strategies which have been vigorously pursued to market cigarettes to children, I think they have an enormous interest to reverse the record of the past to try to put this unforgivable chapter behind them and to start off on a new path. So I still believe that in the end we will achieve an agreement which will convince them, or which they will be convinced will be in their interest.

The advertising issue is the more important one from a legal point of view, but I think we'll get there because they have now -- with this evidence continuing to mount up about the deliberate strategy which was followed, they have a big interest in pursuing it.

On the other matter, you know, I'm not going to comment on that. I'm going to try to do what the Supreme Court said I should do, which is not to be in any way deterred by this, and I'm going on with my business; others will comment on that.

Q Mr. President, Moody's debt rating service earlier today issued a warning about Japan's sovereign debt. The United States has repeatedly urged Japan, with little apparent success, to try to jump start its domestic economy. Do you see any signs that the Japanese government is now ready to take actions that would help bring it into recovery?

THE PRESIDENT: Well, the Prime Minister keeps moving forward in ways that the market seems to believe are insufficient. And we have obviously urged aggressive action, because we want the Japanese economy to grow. We think the Japanese economy is the key to stability and growth in Asia, and we have always wanted a strong, healthy Japanese partner.

Japan is a great democracy, they've been a great partner for us, they've been a great engine of economic growth for many years until the last few years. There may be some momentary disruption because now you have some business leaders speaking out in Japan, but it appears to us on the outside of this that there is an ongoing struggle between what is now the articulated view not only of the United States and others, but of the business community in Japan about the direction that country should take and the entrenched resistance to that in the permanent government bureaucracy that followed a different strategy with great success in previous years. And I think we need to be both respectful, but firm, in urging the Japanese to take a bold course.

Prime Minister Hashimoto is an able man, and he understands the economy, and I believe he wants to take such a course. What has to be done is that the people within the permanent government there, which have always enjoyed great power, have to realize that the strategies that worked in the past are not appropriate to the present. They have to make a break now in some ways that's not so different from the break that we made in 1993.
You simply can't stay with a strategy that is clearly not appropriate to the times and expect it to get the results that are needed for the country.

But Japan is a very great country full of brilliant people who have a great understanding of economics.

And as I said, I think the Prime Minister understands this and is willing to take risks and wants to do it. And he's got this raging battle going on and I have to hope that the forces of the future will prevail.

Thank you.

END 10:20 A.M. EST

Message Sent To: _____

FIRST LADY HILLARY RODHAM CLINTON

REMARKS FOR ACRC THIRD ANNUAL GALA

LITTLE ROCK, ARKANSAS

October 8, 1998

[Acknowledgments: Pat McClelland; Dr. Harry Ward (*Univ. Of Arkansas Medical School Chancellor*) and Betty Ward; Dr. Bart Barlogie (bar-LOH-ghee)(*Dir., Cancer Research*) Gov. Mike Huckabee; and Arkansas First Lady Janet Huckabee.]

Good evening. It is wonderful to be back at ACRC, and to see so many old friends. The Arkansas Cancer Research Center has done so much for my family, and for so many families. I am proud to say that as Governor, my husband signed the original law that made ACRC possible more than 10 years ago. Now, over 60,000 patients come here every year. That is a remarkable achievement. But one of the things I admire the most about ACRC is not how many people are treated here every year, but how you well treat every one of those people -- and their families -- while they are here.

Anyone who has ever had cancer themselves or seen a friend or family member go through that difficult experience knows what a difference a kind word by a nurse can make. How much it means to have a doctor take the time to really explain a procedure or a prognosis. And how much easier it is to bear pain, or fear, or loss, when you know that the medical staff sees you not only as a patient, but as a person.

My family and I experienced that very human kind of treatment when my mother-in-law Virginia Kelley was here. I know many of you had the opportunity to get to know Virginia. And even though she was struggling with breast cancer, in a way, I think you saw her at her best -- her courageous, uncomplaining, irrepressible best. She never wanted anyone to feel sorry for her. She faced cancer the way she faced every obstacle in her life -- she led with her heart. She looked her cancer square in the eye, then put on her lipstick and her false eyelashes, and went out and celebrated life. She was a great inspiration to everyone who knew and loved her.

I have seen that same simple courage in so many people with cancer. But courage alone will not conquer this terrible disease. Only a sustained commitment to cancer research, prevention, detection, and treatment will win that war once and for all.

For almost six years, my husband has made fighting cancer one of his administration's top priorities. We have helped cancer patients keep health coverage when they change jobs. We have accelerated the approval of cancer drugs. And we are working to end the most preventable form of cancer by stopping tobacco companies from luring our children into an addiction that will cut short their lives.

But you and I know that the single most important thing we can do to beat cancer is to increase funding for cancer research. As we meet here today, the first medicines to prevent prostate cancer, colon cancer, and breast cancer are being tested. We are closing in on the genetic causes of many kinds of cancer. New tools for screening and diagnosis are giving new hope to cancer patients and their families. None of those stunning discoveries would have been possible without well-funded research.

Since he first took office, the President has consistently increased funding for cancer research. Last month, he took an historic step to build on that commitment when he proposed an unprecedented, multi-year increase in funding for cancer at the National Institutes of Health. This action will help to fund hundreds of cancer research projects around the country. Somewhere in America right now, a young researcher may have an idea that may one day lead to a cure for cancer. With this single step, we are closer than ever to that day.

The President is also building on our efforts to find the best means of prevention, the most accurate diagnostic tools, the most effective and humane treatments -- and someday soon, a cure.

To draw on the critically important perspective of cancer patients, he has directed all federal cancer research programs to fully integrate patients and advocates into the process of setting research priorities by next year.

To help us continue to unravel the genetic secrets of cancer, he has issued a challenge to the scientific community to develop, by the year 2000, new diagnostic techniques for every major kind of cancer so we catch it at its earliest and often most treatable stage.

To give more patients access to cutting-edge clinical trials, he has directed the National Cancer Institute to speed development of national clinical trials systems. And he has urged Congress to pass his proposal to cover the cost of those trials for Medicare beneficiaries who need them most.

This is the kind of comprehensive, sustained strategy we need to win the fight against cancer. Our families deserve nothing less -- and the President will settle for nothing less -- than a cure in our lifetimes to this devastating disease.

Two weeks ago this Saturday, nearly one hundred thousand people gathered on the Great Mall in Washington to add their voices to the growing chorus of Americans who say: the time has come to find that cure -- and we will do it. When our children look back on this time, I feel certain that they will be able to say that we made good on that pledge. And when they do, it will be because ACRC led the way.

Thank you, and God bless you all.

Draft 10/21/98 3pm
Waldman/Tamagni

PRESIDENT WILLIAM J. CLINTON
STATEMENT ON BUDGET
THE EAST ROOM
October 21, 1998

I'm very glad to have this chance to join you this afternoon to recognize National Breast Cancer Awareness Month -- and to tell you about an important victory we have won for American families -- and for women's health.

Twenty five years ago, America declared war on cancer. Twenty five years from now, I hope that we will have won that war. Twenty five years from now, I hope that the war on cancer will have about as much meaning to school children as the War of 1812. Twenty five years from now, I hope those school children don't even know what the word "chemotherapy" means.

For nearly six years, our administration has worked hard to bring us closer than ever to that day. We have helped cancer patients to keep their health coverage when they change jobs. We have accelerated the approval of cancer drugs while maintaining safe standards. We have continually increased funding for cancer research. And I appointed Dr. Jane Henney, the first woman and the first oncologist to be named Commissioner of the Food and Drug Administration. And I am pleased to report that within the last two hours, she was confirmed by the United States Senate.

Today, thanks to the efforts of so many people in this room and around the country, our progress is nothing short of stunning. We are closing in on the genetic causes of breast cancer, colon cancer, and prostate cancer, and testing medicines to prevent these cancers. New tools for screening and diagnosis are returning to many patients the promise of a long and healthy life. And from 1991 to 1995, cancer death rates actually dropped for the first time in history.

I am especially proud of the five years of progress we have made in the prevention, detection, and treatment of breast cancer. As many of you may know, I lost my mother to breast cancer just a few years ago, and not one day goes by when I don't think about her courage, and the courage of so many women facing this disease.

But you and I know that courage alone will not find a cure for this disease. Only a sustained commitment to breast cancer research will win that war once and for all. Without research, there would be no mammography. Without research, there would be no genetic testing for vulnerability to breast cancer. And without research, there would be no tamoxifen, which is showing so much promise in the treatment of breast cancer.

Just this afternoon, [I signed/the Senate passed] a fiscally responsible balanced budget

with breakthrough funding for cancer research. I am very pleased that this new budget includes a record increase of $400 Million in new support for the National Cancer Institute. With nearly $3 billion in funding, NCI will now be able to fund critical new research, including a trial to expand the use of Herceptin [*her-septin*] to treat breast cancer earlier, and ten more new clinical trials for breast cancer treatment. This is an important victory for women's health. It is a balanced budget that honors our values.

In this as in so many things, let me salute and thank Vice President Gore, who spearheaded our drive to include this research funding in this budget.

Let me mention a few other ways that this budget strengthens our nation.

First and foremost, this balanced budget honors our duty of fiscal responsibility. We now have a budget surplus, the first in nearly three decades and the largest in history. And despite the temptation to spend that surplus on tax cuts or spending programs, this budget meets my challenge to set aside the surplus until we save Social Security.

And this budget will widen the circle of opportunity. By beginning to hire 100,000 new teachers, we will reduce class size, improve discipline, and make our classrooms a place for learning. And with thousands of tutors to help children to read, and up to 100,000 mentors to help poor children prepare for college ... with after-school programs to give 250,000 of our children someplace to learn instead of the streets ... with half a million summer jobs to teach our young people the discipline and joy of work ... this budget takes dramatic steps to invest in the next generation.

This budget strengthens our nation in other ways as well. It will bolster our prosperity at a time of financial turmoil around the world, by meeting our obligations to the IMF. It will strengthen protection of the environment, guaranteeing safer water, cleaner air, more pristine public lands. It will help struggling farmers who face natural disasters and declining export markets.

We had to fight for each of these priorities despite the resistance of the congressional majority. And we are still learning every day of wasteful spending tucked away in it pages. But all in all, this is a balanced budget that honors our values. It will strengthen our economy while it invests in our people. And it is good for America.

The victories in this budget must not obscure the fact that this has been a Congress too often marked not by progress but by partisanship. We shouldn't have to cram a year's worth of achievement in a 4000 page, 40 pound document.

Even in its last days, this Congress has persisted on the path of partisanship. The Congress has just sent me a bill to reauthorize the State Department that contains unacceptable restrictions on international family planning -- even though women in countries with strong family planning have fewer abortions. The Congress even seeks to tie meeting our obligation to the UN to this unrelated and controversial provision. I vetoed this provision once before,

and they sent me this bill knowing full well I would veto it again. And today, I have done so.

The 105th Congress leaves town with a great deal of unfinished business in this country -- challenges that we must meet in the coming months and years to strengthen our families and our nation. We know what we must do; and we know how we must do it.

The next Congress must act on behalf of the health of our families by passing a bipartisan Patient's Bill of Rights. Our plan says to cancer patients and all Americans: You should have the right to a specialist such as an oncologist. You should not have to worry that you will have to change doctors in the middle of your cancer treatment. You should have the right to an independent appeals process if you are getting denied or delayed critical treatment. Managed care or traditional care, every American deserves quality care -- and we mean to give it to them.

The next Congress should act in other ways to strengthen the health of women. This year, I asked the Congress to cover clinical trials for Medicare beneficiaries so they can get cutting edge treatment. I asked Congress to outlaw discrimination based on the result of genetic screening. This Congress failed to act. The next Congress should act.

The next Congress must meet our obligations to our children by modernizing our schools.

And above all, the next Congress must be the Congress that acts to save Social Security. Social Security has lifted a generation of elderly Americans from poverty. And as we will be discussing here at the White House on Friday, Social Security is especially vital to women, who have fewer pensions and smaller savings. If we want to keep this commitment as strong for our children as it has been for our parents, we must act now. And this moment of prosperity offers us a chance to do so.

I am disappointed that the leader of the majority party in the Senate has now said that he may not be willing to join me in our efforts to save Social Security. That's too bad -- because we should work together, and we know what good can come to the country when we do. But let me be clear: We must save Social Security; I am determined that this next Congress will save Social Security. And I will work to strengthen Social Security -- with anyone ... any time ... anywhere. On Social Security, we need progress, not partisanship. We cannot let partisanship derail our best opportunity to strengthen Social Security for the 21st Century.

We now have only 436 days until the new millennium. It can and must be a time to redouble our efforts, to honor our parents, to strengthen our nation, to honor the tenacity and courage each of you shows every day. This is a moment to harness the greatest breakthroughs of science to our greatest challenges as a people. If we do what we must, if we act together and press our advances against the scourge of cancer, then the dawn of a new century can be a dawn of a new era of human health. I thank you again for all you do, and ask you to work with me in these coming days to make that dream a reality.