Mr. Speaker, under leave to extend my remarks, I include an address which I delivered to the
Rhode Island Federation of Women's Clubs, at Providence, R.I., on December 7, 1962.

The Conquest of Uterine Cancer Program

It is a real pleasure for me to have been asked to address you on this occasion, on the anniversary of Pearl Harbor Day because it seems so significant. In the campaign you have undertaken which was launched by the American Federation of Women's Clubs, the way you have faced an enemy far more formidable than the one that was faced and defeated after Pearl Harbor. The lives of American women are at stake. Your task is to prevent these deadly diseases from taking them.

The partnership between the General Federation of Women's Clubs and the American Cancer Society in the promotion of health education spans the entire modern era of cancer research and control. That era began in 1905 with the adoption of the National Cancer Institute Act and the launching of the society's first nationwide educational campaign. It was from this partnership that the American people in the task of overcoming deaths by education and persuasion. This is the campaign you have undertaken which is at stake. Your success is dependent on the cooperation of everyone, for it is your adversary after that sneak attack. This is an examination, through the microscope, of fluid taken from the body, for the detection of cancer cells among the cells shedding off the body each day. The observance of abnormal cells warns the doctor that cancer may be present.

The discovery that cancer is caused by viruses is one thing. These investigations have led to the prevention of at least some types of human cancer through some kind of immunization methods. The early investigations recently developed have already made it possible to prevent some tumors in animals.

One such weapon is the "pap" smear. This is an examination, through the microscope, of fluid taken from the body, for the detection of cancer cells among the cells shedding off the body each day. The observance of abnormal cells warns the doctor that cancer may be present. Although the procedure is noted for its accuracy and for the detection of cancer in general, it is the most powerful and most perfect weapon yet developed for conquering uterine cancer, which takes the lives of 14,000 American women a year.

The "pap" smear, developed by Dr. George N. Papanicolaou who received generous support for his work from the American Cancer Society, can detect uterine cancer months, and even years, before ordinary symptoms develop. In the fact that cervical cancer in this preinvasive stage is practically 100 percent curable;

The new conquer uterine cancer program constitutes an expansion of the Society's basic 10-point cytology program which was launched some 3 years ago. Since then, in close cooperation with the medical profession, great progress has been made in encouraging "pap" smears as part of regular checkups for women. Medical cooperation has also insured a suitable balance between medical resources and laboratory facilities and the increasing demands made upon them as the result of the program.

The main objective of the uterine cancer program is the conquest of cancer, with emphasis on the conquest of the group of cancer that most are well known to have "pap" smears regularly. A survey made for the society by the Gallup organization showed that 40 percent of the adult female population—some 23 million women—still did not know about this lifesaving examination. Of women 25 and over, 2 percent said they had never had a "pap" smear. In the society's own research, 10 percent of the women studied said they had not had a "pap" smear because they were not sure of the accuracy of the examination, as compared to 71 percent of women aged 35 to 50. This situation would seem particularly pertinent to young women who may be the immediate past president of the American Cancer Society, that such federated club members try to persuade the women,
preferably a nonmember, to have a physical and a "pap" smear.

The uterine cancer program with the General Federation of Women's Clubs is regarded as a 1-year pilot phase of a consolidated and expanded pilot project, to be continued in future years with other women's groups, and with women not in clubs. A distinguishing feature of the pilot program is that it introduces an element of incentive or even competition on a broad scale in an organized way. For federated clubs, the goal is to encourage the maximum participation of members as possible for a "pap" smear and checkup within the period of a year—possibly a lifetime project. Clubs with outstanding participation by members will receive certificates of award from the American Cancer Society.

I would like to point out that the coming year is a most appropriate time to bear down on your efforts in this life-saving campaign. Nineteen hundred and sixty-two will mark the 25th anniversary of one of the most important pieces of legislation ever passed in the Congress. I have reference, of course, to the National Cancer Institute Act of 1937, which was signed into law by President Franklin D. Roosevelt on August 5 of that year.

Several months ago I suggested in a public address that steps be taken, both within and outside the Government, to observe this anniversary in an appropriate manner. I suggested that due note be taken of the program made possible by this quarter-century, and of the task remaining before us for the conquest of this dread disease. I urged that we rededicate ourselves to the completion of this unfinished task by all possible means.

I am happy to say that the National Cancer Institute and the Cancer Society are cooperating to arrange a number of activities by which 1962 will be observed as cancer year. These activities are designed to encourage the scientific community in its research efforts, to give the public complete information about progress against cancer and the problem itself to be resolved, and to emphasize the importance of each individual's participation in the total effort for the control of cancer, reference, of course, to the National Cancer Institute in the late thirties. It was around that time that infectious diseases were being brought under better control and it was becoming obvious that the chronic and degenerative diseases were going to be the big problem of the future. These diseases were leading causes of death in this country, and it was only a year later that cancer moved into second place ahead of influenza and pneumonia. From then on, with the aid of sulfa drugs and later the antibiotics, deaths from infectious diseases steadily declined, and the proportion of our population liable to the threat of chronic diseases in later life began to grow.

The National Cancer Institute was the first unit of our medical research center at the National Institutes of Health in Bethesda, Md. It was therefore the nucleus of a whole new concept of responsibility for the conduct and support of medical research on a scale far beyond the resources of private philanthropy or commercial enterprise. These activities include not only research itself, but also the construction and equipping of laboratory buildings and hospitals, the training of scientists, and the development of public health programs for the control of our major killing and crippling diseases.

In taking special note, then, of the anniversary of the National Cancer Institute Act of 1937, we are really recognizing the inauguration of a whole new approach to medical research. As this new pattern has developed over the years, it has mobilized research talent and facilities throughout this country, and even abroad, for the most thorough and comprehensive attack ever made on the diseases that afflict mankind.

Those who work professionally in the cancer field are confident that the knowledge we possess today, if fully applied to the control of cancer, could quickly improve the ratio of lives saved from 1 in 3 to 1 in 2. But the point here is that right now, the best we can possibly do is to save only half of the people who get cancer, and I am sure we all agree that that is not enough.

What about the other half? What is going to be their fate? The answer can come only from continued research and prompt application of new knowledge gained through research.

In the cell examination test for uterine cancer—the "pap" smear research has given us a very effective weapon against one form of cancer. It is a form of cancer that takes the lives of many women in their most productive years and at a time they are most needed by their families. Thus, the 14,000 fatal cases of uterine cancer a year not only cause suffering and loss of life to the victims themselves, but strike a serious blow to families and communities the country over.

The American Cancer Society and the General Federation of Women's Clubs have undertaken a huge and important task. This is a pilot project, which means that the success achieved with it will greatly influence the pattern of future educational campaigns enlisting the cooperation of other national organizations to carry this vital health message to women throughout the country. There is much at stake here apart from the lifesaving character of the effort itself. There is an opportunity for both the society and the federation to show the country how effectively a project like this can be carried out.

Here in Rhode Island we want to pick up our end of the load and make one of the best showings of any State. We know how to do these things and we do them well. More than that, of course, we are no less concerned with the health and welfare of our people than any other region of the United States. As I said, there is much at stake here. But there is nothing to risk, and nothing to lose. There is only the opportunity to work hard for an undisputed cause, and to enjoy the rewards of a well-directed effort to stamp out one of the greatest threats to women everywhere—the threat of uterine cancer.