1	HOUSE OF REPRESENTATIVES - FLOOR VERSION
2	STATE OF OKLAHOMA
3	2nd Session of the 55th Legislature (2016)
4	HOUSE
5	RESOLUTION 1043 By: Nelson and Thomsen
6	
7	
8	AS INTRODUCED
9	A Resolution expressing certain belief; encouraging
10	partnerships that improve effectiveness of treatments for childhood cancer and reduce negative effects of
11	such treatment; and directing distribution.
12	
13	
14	WHEREAS, cancer is the leading cause of death by disease in
15	children in the United States; and
16	WHEREAS, approximately one in 285 children in the United States
17	will be diagnosed with cancer before their 20th birthday; and
18	WHEREAS, the incidence of childhood cancer is on the increase,
19	averaging 0.6 percent increase per year since the mid 1970s, an
20	overall increase of 24 percent over the last 40 years; and
21	WHEREAS, childhood cancer occurs regularly, randomly and spares
22	no ethnic group, socioeconomic class or geographic region; and
23	
24	

WHEREAS, the causes of most childhood cancers are unknown and are not strongly linked to lifestyle or environmental risk factors and therefore cannot be prevented; and

WHEREAS, there are 16 major types of pediatric cancer and more than 100 subtypes; and

WHEREAS, through research great advances have been made in treating childhood cancer, increasing the overall survival rate of children with cancer to nearly 80 percent, but some childhood cancers still have a high mortality rate such as advanced stage neuroblastoma, metastatic sarcomas and certain brain tumors; and

WHEREAS, survival rates can range from almost zero percent for cancers such as DIPG, a type of brain cancer, to as high as 90 percent for the most common type of childhood cancer known as Acute Lymphoma Leukemia (ALL); and

WHEREAS, the most common causes of death in childhood cancer survivors are the return of the primary cancer, a different primary cancer and damage to the heart and lungs; and

WHEREAS, more than 95 percent of childhood cancer survivors will have long-lasting chronic conditions from treatment, and will have a significant health-related issue by the time they are 45 years of age from side-effects of either the cancer or, more commonly, the result of the currently employed treatments which are toxic and harsh; and

1	WHEREAS, the late effects of childhood cancer include
2	infertility, heart failure, breast cancer, secondary cancers and
3	other negative health consequences; and
4	WHEREAS, "Curing childhood cancer is the equivalent of curing
5	breast cancer in terms of productive life years saved", according to
6	Dr. Eugenie Kleinerman at MD Anderson Cancer Center; and
7	WHEREAS, the average age at diagnosis of cancer in adults is 67
8	years with 17 years of life lost on average to cancer, whereas the
9	average age at diagnosis of cancer in children is 6 years with 71
10	years of life lost on average to cancer; and
11	WHEREAS, the FDA has approved only three drugs for pediatric
12	cancer in the past 30 years; and
13	WHEREAS, for many of the childhood cancers the same treatments
14	that existed in the 1970s continue without change; and
15	WHEREAS, on average, pediatric hospitalizations for cancer cost
16	almost five times as much as hospitalizations for other pediatric
17	conditions; and
18	WHEREAS, in 2014 it was estimated that childhood cancer research
19	received only four percent or \$195 million of the National Cancer
20	Institute budget of \$4.9 billion; and
21	WHEREAS, approximately 60 percent of all funding for cancer drug
22	development comes from pharmaceutical companies which commit
23	virtually no funding or effort to drug development for childhood

24

cancer because of the small profits to be made from the small market size; and

WHEREAS, in 1999, as part of the tobacco settlement, the State of Texas created a \$200 million permanent endowment dedicated to childhood cancer research at the University of Texas Health Science Center at San Antonio and significant portions of tobacco settlement funds at other Texas medical schools have been devoted to childhood cancer research; and

WHEREAS, for each dollar the Oklahoma Tobacco Settlement
Endowment Trust invests, researchers are able to attract another
three dollars in outside support for scientific research.

NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES
OF THE 2ND SESSION OF THE 55TH OKLAHOMA LEGISLATURE:

THAT the Oklahoma House of Representatives believes that

Oklahoma has an opportunity to benefit children who are battling

cancer by establishing research partnerships between public entities

like the Oklahoma Tobacco Settlement Endowment Trust and public

universities and other medical research organizations.

THAT the Oklahoma House of Representatives encourages such partnerships designed to improve the effectiveness of treatments for childhood cancer and reduce the negative late effects of treatment of childhood cancer so more children will survive cancer and suffer fewer negative late effects from treatment.

1.3

THAT the Oklahoma House of Representatives directs that this resolution be distributed to the Oklahoma Tobacco Settlement Endowment Trust, the University of Oklahoma and the Jimmy Everest Center at the Children's Hospital at the University of Oklahoma Medical Center. DIRECT TO CALENDAR.

HR1043 HFLR
BOLD FACE denotes Committee Amendments.