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DEPUTY ASSISTANT SECRETARY FOR HEALTH (WOMEN'S HEALTH)
ASSISTANT SURGEON GENERAL

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Missiles to mammograms: New uses for

By DELIA M. BIOS
NEWHOUSE NEWS SERVICE

WASHINGTON — The human breast is not the frontier that scientists at the SETI Institute — as in the Search for Extra-Terrestrial Intelligence — usually explore.

Scientists there are known for devising a way for even the faintest radio signals from space to cut through the backdrop of noise that surrounds us. But, it turns out, the cancerous breast sends its own elusive signals that radiologists strain to see against the denseness of healthy tissue, especially in mammograms of younger women.

This is where the two frontiers intersect.

Dr. Kent Cullers, a SETI scientist, is applying to mammograms the same technology he uses to listen to space. Except that in this research, partly funded by NASA, he is searching for the tell tale "visual sounds" of cancer. The cancer apparently gives off a different signal within the varied depths of breast tissue.

Joan Vernikos, NASA's Life Sciences Division director, excitedly calls Cullers' work "extremely promising."

Excitement reverberates not only in NASA offices, but in the Department of Defense and throughout what is obliquely referred to as "the intelligence community" as technology once directed at military targets or the mysteries of space is now zeroing in on cancerous tissue in human breasts.

There is a sense that new weapons in the battle against breast cancer are on the verge of being made available to women and their doctors.

It has been three years since the Office on Women's Health in the U.S. Public Health Service initiated "technology transfer" conversations with the Department of Defense, the CIA and NASA.

Now, at least two clinical trials are nearing completion. And there are projects that new diagnostic technologies are only one to two years away from in



NEWHOUSE NEWS SERVICE

Army Gen. Russ Zajtchuk, commanding general of Medical Research and Materiel Command, directed the development of the \$2 million Mobile Breast Care Center, designed to get technology to women without access to medical facilities.

breast care centers. Institutions such as the University of Chicago, the University of Pennsylvania Medical School, Harvard Medical School and Massachusetts General Hospital have been actively involved in moving the research forward.

"We are really on the border, and we're getting closer," says Dr. Daniel B. Kopans, director of the Breast Imaging Division at Massachusetts General Hospital (an associate professor of radiology at Harvard Medical

School.

'Missiles to Mammograms'

What is most promising is how space, defense and intelligence technology allows the unprecedented mapping of the landscape of the breast. This was the hope touted three years ago when the project, dubbed "From Missiles to Mammograms," was launched.

"What we call diagnosis, they call identification; we call images, they call exploit (the); they're talking about looking for



NEWHOUSE NEWS SERVICE

Dr. Susan Blumenthal, deputy assistant secretary for women's health in the Department of Health and Human Services: "With the end of the cold war, our new national enemies are diseases like breast cancer."

buildings, silos, tanks and planes and we look for tumors," says Dr. Mitchell Schnall of the University of Pennsylvania. He is the primary investigator for the clinical trials.

"The problems are the same," he says. "It's just a matter of what the target is."

The technologies now in clinical trials involve computer-aided diagnosis and magnetic resonance imaging (MRI). In the first case, the computer acts as a back-up for a radiologist reading a mammogram. The computer not only points out what the radiologist might not see, but using intelligence technology, also learns where false readings are likely to occur and so cuts down on false alarms. It spots false readings in much the same way as high-tech military surveillance knows buildings to be ways. Researchers expect to com-

plete this trial by January.

The second tech tested enhances MRI cancer. In an MRI, is injected to plump up to tissues. Cans "grow" their network.

But alignment of after images. And that's where work comes in. Local tissue changes way that inteling compare images to have moved th one day to the

Kopans estimates ably, computer-aid and digital mammo results in sharper i ray films, may be clinical use in the two. He expects the ficated MRI contri to become available several years.

"Looking for mogram is like in a forest," Kopan we can move the o of the way, we ca we're looking for."

These are consid logical leaps, consid bent diagnostic acv for breast cancer mamamography, is old and prone to The X-ray film ix percent to 20 perc according to the O en's Health.

out of four mamograms are women often are su necessary surgical

Early detection woman's life later upon it. And so sies over when a women should get have heightened c the imprecision of techniques now pecially true for yo The denseness of ti sue frustrates radi to get reliable readi

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chnology
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perfect diagnostic breast screen-
ing did exist, but not in the right
hands. The defense and intelli-
gence communities, with big bud-
gets and national security as their
mission, are estimated to be 10
years ahead of the medical field
in their development and use of
high-tech imaging.

By picking up the telephone
and calling the Department of
Defense, the CIA and NASA, Dr.
Sasen Blumenthal set out in 1994
to do something about that. As the
first deputy assistant secretary
for women's health in the Depart-
ment of Health and Human Serv-
ices, she has acted as both cata-
lyst and booster for the
technology transfer now taking
place.

"With the end of the Cold War,
our new national enemies are dis-
eases like breast cancer," Blu-
menthal says.

The whole enterprise is cloaked
in a sense of mission.

Army Gen. Russ Zajtcuk is
commanding general of Medical
Research and Materiel Command
at Fort Detrick, Md. Under his di-
rection, and in a partnership with
Blumenthal's office, the Mobile
Breast Care Center has been de-
veloped. It uses digital mammo-
graphy, as opposed to X-ray film,
and so can get sharper pictures
and a more accurate diagnosis.

The \$2 million van, which car-
ries a sign with the names of the
Department of Health and Hu-
man Services and the Depart-
ment of Defense, is designed to
take technology to women who do
not have access to breast centers.
The images can be transmitted by
satellite in minutes and, if neces-
sary, a needle biopsy can be per-
formed right there.

"On the defense side, we're cer-
tainly helping the entire country
from a defense and security
stance," says Victor Korsun, divi-
sion vice president for special
programs at the National Infor-
mation Display Laboratory in
Princeton, N.J., which does intel-
ligence research for the Depart-
ment of Defense and the CIA.
"And here we were actually be-
ginning to p individuals, in this
n, who are half the
country."

TECHREPORT

A Look at Technology in Government

Forging Swords into Scalpels

by Loretta "Asta" Jackson

Government agencies, contractors, companies and people whose business it is to defend the country from without, to guard against attacks by ballistic missiles and enemy agents, have also been devoting their time and intellectual resources to defending citizens from enemies within, namely diseases and other medical calamities. The Office of Technology Transfer in the BMDO (Ballistic Missile Defense Organization, formerly the Strategic Defense Organization, or SDIO) has for several years encouraged and funded research into possible civilian exploitation of much of that organization's advanced defense technology. Some of the most impressive and least widely known applications have been refined by the medical community.

Surveillance Technology Targets Cancer

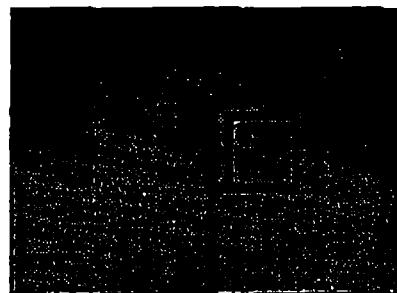
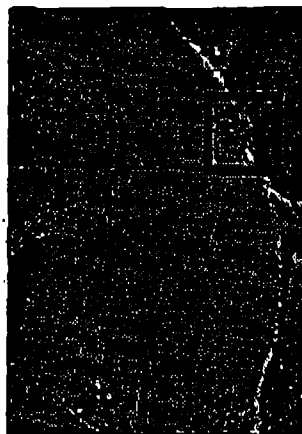
The Department of Health and Human Services (HHS) has joined forces with the CIA, NASA, DoD and others to form the Federal Multi-Agency Consortium on Imaging to Improve Women's Health. "With the end of the Cold War we are targeting new natural enemies including diseases such as breast cancer," says Susan Blumenthal, MD. She is the Deputy Assistant Secretary for Women's Health, assistant Surgeon General at HHS, and she is on a crusade to sock out and destroy breast cancer.

"An all-out assault on the disease," as she puts it. "If we can see enemy missiles 20,000 miles away, and see the surface of Mars through the Hubble Telescope, then surely we should be able to detect small lumps in a woman's breast right in front of us.

Mammography technology is over 40 years old, and needs to be updated." Dr. Blumenthal's mother suffered from breast cancer so this is something of a personal battle for her.

"Pattern Recognition Tools to Assist Early Detection of Breast Cancer" is one of the new uses for defense technology. Detecting small targets in reconnaissance imagery has been a tough problem for the DoD. In solving it, they developed a system that uses "target context"; for instance, roads surrounding a military base. Roads are easier to see, so they can be used to guide the search for associated small targets, such as buildings, bunkers, hidden airfields and the like.

This same "target context" imaging can be used for mammogram screening. The tissues and veins surrounding a cancerous tumor can aid in the early detection of such tumors. Current mammograph technology misses 16% of cancers, and can give false readings which in turn cause needless — and expensive — biopsies to be performed. Pilot studies are being held at Massachusetts General, and hospitals at the University of Chicago and University of Pennsylvania. Dr. Blumenthal says that clinical trials will begin this fall.



Automatic Target Recognition can be used to find details in images that what otherwise escape the viewer. In this image it finds a small tumor (left) or a cancerous lesion (right).

Space-age Prosthetics

It wasn't quite a personal onus, but a wistful comment that helped get a San Diego, California, aerospace company into the medical technology transfer business. Sparta, Incorporated had long been in the defense business and was well known for their work in composite materials when Ed Eckenhoff, president of the National Rehabilitation Hospital in Washington, DC, pointed to his leg and said, "I'm walking around with 18 pounds of steel... Wouldn't it be wonderful if somehow I could reduce my weight by 15 pounds?" Eckenhoff, left a paraplegic by a car accident, noted that powerful new lightweight materials being developed for space applica-

tions could be used in developing lighter braces.

Mr. Moreno White of Sparta's Internal Research and Development Program and Guy Hammer of the BMDO's Biomedical Applications Program accepted the challenge and began to research the problem. "We [Sparta] have been successful in tech transfer," says White.

"We took a look at the utility of the leg brace and decided to try it. We knew we had good answers to problems, we just didn't know the right questions.

"At first we stumbled a little. We discovered that working in the medical field is a lot different than the defense industry. For instance, from an engi-

TECHREPORT Every Monday in Washington Business

near's point of view there are no design parameters in the medical field." So the first leg brace prototype was designed for use by a 220 lb. linebacker. Once the design team was happy with that brace, they then began to "reverse engineer" what they had, to modify the initial components for more modest use.

"The National Rehabilitation Hospital has helped us improve the design with their engineering expertise," said White. "First we focused on the ankle and knee joints, because they were the most difficult."

Each subcomponent was made and test in trial and true prototype technique: build a little, test a little, take what you learned back to the drawing board and refine, refine, refine. Another part of the design considerations was that all the composite components could be integrated with conventional metal braces, so that for instance a composite knee could be fitted to a metal leg, and so on. Tests have been promising. Though the brace and the components are still in the evaluation process, they should be available by next year.

- Breast cancer strikes over 100,000 women annually
- Breast cancer causes over 45,000 deaths per year
- Mammography is
 - 10-15% "false negative"
 - 40% "false positive"

Air Force Dummies

Said White enthusiastically, "We are very involved with this integration of defense and medical technology, and we are really excited about the future of orthotics." For example, the Air Force is interested in Sparta's work with materials that imitate bones and flesh.

Currently the Air Force uses "hybrid 3" dummies, like the ones we see on TV. But the violent stresses of an ejection seat are very different from a car crash, and the Air Force can't very well test their prototype seats on real people. So Sparta is using composite materials technology originally designed for defense to begin a prototype design of artificial bone and flesh that can be monitored and tested to destruction without turning a hair on any pilot's head.

"We're really excited about the future of integrating military technology into civilian applications," said White. "However, orthotics is looked upon as kind of an orphan industry. Not many people are paying attention to it because it's not market-driven. There's a big need for more research, but very little funding. This is a partnership that deserves better."

Indeed, American taxpayers have already paid for this basic research. The men and women involved in this technology transfer are enthusiastic and very eager to help the medical community learn what they have to offer. The technology transfer programs at

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202-680-7880 voice
202-401-4005 fax

BMDO and elsewhere are modest in terms of budget, but the return on investment is incalculable. ■

Arlene Jackson is the editor of *Space Energy and Transportation*, a quarterly journal. She can be reached at shadow@bbl.com

Army Research Laboratory Combats Sudden Infant Death Syndrome

Sudden Infant Death Syndrome (SIDS) is a leading cause of death for infants under the age of one. The Army Research Laboratory (ARL) is working to develop a device that can detect and prevent SIDS. The device, called the SIDS Detection System (SDS), is a non-invasive, non-toxic, and non-painful device that can detect and prevent SIDS. The SDS is a non-invasive, non-toxic, and non-painful device that can detect and prevent SIDS. The SDS is a non-invasive, non-toxic, and non-painful device that can detect and prevent SIDS.



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Some of the other military/civilian applications in 1996:

- Detecting Changes in Serial Mammograms for Early Detection of Breast Cancer. A dual use application of two-dimensional image alignment technology
- Detecting Lesions in Magnetic Resonance Breast Scans
- A dual use application of three-dimensional volume alignment technology

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American Medical NEWS

AMERICAN MEDICAL ASSOCIATION • SEPTEMBER 8, 1997 • VOLUME 40 • NUMBER 36

Army musters research funds to wage war on breast cancer

By Stephanie Sapienza
AMERICAN STAFF

WASHINGTON — The U.S. Army Medical Research and Materiel Command bills itself as a service agency "for the war fighter."

So why is it spending millions of dollars a year to fund extramural research projects on breast cancer?

The answer: In the early 1990s, breast cancer research advocates felt they were losing the constant fiscal battle over health spending and engineered a budgetary "slight of hand" to increase funding for their cause. The result was the Army's Breast Cancer Research Program, which seeks ways to reduce the incidence of the disease, increase survival rates and improve the quality of life for patients.

And in the last five years, Congress has provided \$566 million for the program — nearly 40% the amount the National Cancer Institute dedicated to breast cancer studies for the same period.

For fiscal year 1998, the House has recommended another \$100 million, while the Senate would provide \$175 million in its separate version of the Defense Dept. appropriations bill. A conference committee will settle the difference when Congress returns to work this month.

As a result of legislation President Clinton signed into law last month, future appropriations will be bolstered by a new funding source: the Breast Cancer Research Stamp — a money maker that will be issued by the U.S. Postal Service. For each stamp sold, a portion of the proceeds will go toward research costs, with 30% of those dollars directed to the Army's peer-reviewed program.

Budgetary maneuvers

Indeed, this recent attention is a far cry from the atmosphere that spawned the Army initiative, which Joann Schellenbach, spokesperson for the American Cancer Society, says **BREAST CANCER**, page 60

Continued from page 60
fit into the context of the program's overall objectives.

Input from cancer survivors

Both review panels would include "consumer" representatives — people who are breast cancer survivors or who have close friends or family members who have suffered from the disease — to assist in the decision-making and priority-setting processes. This element of the Army's program is now considered a model approach.

"It's unique ... the first time the public has been involved in the process to this extent," Viscio said.

The impact has been significant.

"A lot of scientists never see a breast cancer survivor ... or come into contact with someone who has the disease," Lindsay said. By involving the perspective of these stakeholders, "the process is a more intimate one, a more human one," he added.

But Viscio is quick to say that advocates' input does not soften the science. Rather, it sharpens it with pointed questions of why and why not and challenges the accepted rules of decades of research, she said.

"We bring an objective perspective. We're there to bring science out of the rut."

Lindsay said the Army was open to the approach because, unlike the NIH and other long-standing scientific funders, there was no legacy in place — no manual of accepted procedures — that would have been challenged.

"We're not taking a punch at anybody, but we have the relative freedom of not being encumbered" by a set of existing rules, Lindsay said. "We, in the Army, are used to taking quick orders and moving out."

The result has been a program structured to resist entrenchment and

respond quickly to new ideas.

When it was first established, for instance, only a sketchy infrastructure was in place to facilitate research advances — no tumor registries, no mouse husbandry, no network for sharing information, Lindsay said. Money during the early grant cycles began to fill this gap.

In the last two years, another priority has emerged: awards intended to strike a balance between risk and reward by stimulating promising and creative, yet speculative, investigations — even if they lack pilot data.

According to the BCRP's status report to Congress, the integration panel opted for this direction as a way to carve out a scientific niche that would be "unique but complementary" to the work done by other agencies such as the NIH.

NIH focuses investments in well-established projects that have significant pilot data. The panel's consensus was that, although this strategy was essential, it prohibited the pursuit of novel, untested ideas, the report said.

This emphasis gives new investigators a chance to compete. "They're not locked out" because their research lacks preliminary evidence, Lindsay said.

Advances that stem from these studies will then flow upward in a scientific pyramid, at the next level receiving support from more traditional sources and ultimately moving to the translational and clinical stages.

Supporters say this course will bring long-term benefits.

"It's a funding source, and researchers go where the dollars are," said ACS' Schellenbach.

Activists can lobby for attention all they want, but if there are no scientists to back them up, the effort is for naught, she said.

This program is ensuring that that does not happen — cultivating interest on the part of young investigators that will likely stay involved in the field," Schellenbach said.

For more information about the Army's breast cancer research program, check the Congressionally Directed Medical Research Program Web site (<http://mrmp-rad6.army.mil/>) or call (301) 682-5517.

American Medical NEWS

AMERICAN MEDICAL ASSOCIATION • SEPTEMBER 8, 1997 • VOLUME 40 • NUMBER 34

Technology that spots missiles may also find breast cancer

WASHINGTON — The Dept. of Health and Human Services' Office of Women's Health is collaborating with the CIA, Defense Dept. and other agencies to adapt imaging technologies used in missile guidance and target recognition to help doctors zero in on breast cancer.

"So much money has gone into the development of [this] technology for military purposes," said Susan J. Blumenthal, MD, MPA, deputy assistant secretary for women's health.

"If we can see missiles 40,000 miles away, why can't this technology be used

to improve mammograms?"

The project began in 1994 as a dialogue with CIA and other intelligence community scientists to identify potential ways to improve 40-year-old mammography technology, which still misses 15% to 20% of all cancers.

The Office of Women's Health now funds related clinical studies at facilities including the University of Pennsylvania, the University of Chicago, the Robert Wood Johnson School of Medicine, Massachusetts General Hospital and the Harvard Medical School.

Research topics include:

- **Pattern recognition tools.** Using automatic recognition technologies that can detect small missile targets in larger reconnaissance photos, a computer-assisted pattern-recognition system has been developed to better identify cancerous tissue in mammograms.

- **Two-dimensional image alignment.** Mammograms provide two-dimensional views of tissue, similar to images on aerial reconnaissance film. By comparing a series of images over time, changes can be detected — whether

tumor movement or growth of cancerous tissue. By superimposing new old images and detecting areas that remain unchanged, subtle alterations can be detected, offering significant potential to improve upon the false reading associated with current techniques.

- **Three-dimensional volume alignment.** Intelligence technology to determine changes in targets by comparing images captured from different vantage points is being evaluated for use in comparing MRI breast scans.

— Stephanie Stapleton

DATE:
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High-tech spy systems may spot cancer

By Marlyne Elias
USA TODAY

Ultra-smart imaging techniques developed by the CIA, the Department of Defense and NASA soon may be used to improve breast cancer detection and cut the huge rate of surgical biopsies that find no cancer.

A collaboration between spy and defense-oriented scientists

and cancer researchers is producing early results that look "enormously promising," says Dr. Susan Blumenthal, women's health chief at the U.S. Public Health Service.

Says Blumenthal, who brought the key players together, "I wondered: If we could see missiles that were 30,000 miles away and look closely at the surface of Mars, why can't we more accurately find tu-

mors in women's breasts right in front of us?"

Mammography misses 15% of cancers, while 3 out of 4 biopsies done for suspicious lumps find no cancer. There are about 500,000 biopsies yearly. Average cost: \$2,000.

Three techniques are being tested in pilot studies at Massachusetts General, University of Chicago and University of Pennsylvania hospitals.

► 3-D magnetic resonance imaging. It could reveal cancers camouflaged by dense tissue in mammograms.

► High-tech change detection. This computerized technique may boost a mammogram's power to detect subtle changes that signal the start of cancer.

► Pattern recognition. This brain-like computer system detects tumor "targets" by auto-

matically spotting biological landmarks that surround even tiny cancers.

Clinical trials will most likely start this year, Blumenthal says. If findings are positive, the Food and Drug Administration has pledged to expedite approval so these methods could be available to consumers within a few years, she adds.

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Wednesday October 23 12:53 PM EDT

Defense Weapons Aimed At Breast Cancer

NEW YORK (Reuters) -- Researchers are getting help in detecting tumors from the Pentagon, as wartime technology joins the assault on breast cancer.

"Technological innovations assist intelligence officers in finding targets camouflaged behind trees via satellite," said Health and Human Services (HHS) Secretary Donna Shalala recently. "Now, clinical trials will determine the safety and effectiveness of the same intelligence technologies to assist radiologists with finding small cancers camouflaged behind breast tissue."

Shalala was referring to three different hi-tech military surveillance devices that are now being adapted to help in breast cancer research.

This innovation doesn't come as a surprise to her HHS colleague Dr. Susan Blumenthal, who heads the new research effort. "If we can image missiles in distant skies, and with the Hubble telescope see the surface of Mars, then surely we should be better able to detect small lumps in women's breasts," she said.

Blumenthal explained at a Washington press conference that three main technologies are being focused on in the search for better ways to detect cancer.

The first technique, called 'neural networks,' arose from the Department of Defense's need to pinpoint very small military targets -- like buildings or weaponry -- in the context of large-scale aerial landscape photography. The DOD developed computer technology that analyzed surveillance photographs, finding patterns that make spotting targets easier. For example, buildings are usually found near roads, so using easily-seen roads within an image makes it easier to hone in on targeted buildings.

A report from the HHS says the technology works in analyzing mammograms as well, because tumors are found in some areas of breast tissue more often than others. "As missile targets can be identified in the context of a changing landscape, so breast cancers can be detected in the context of surrounding tissue structures," according to an HHS fact sheet on the new technologies.

Another 'peace dividend' used to detect breast cancer is called 'two-dimensional alignment technology'. Defense officials use computer technology to spot subtle changes in aerial photographs taken of the same terrain over time. "In reconnaissance film, the change might be troop movements; in mammography it is the growth of cancerous tissue in the breast," explains the HHS report.

One more potential cancer-fighting technology is called '3-D volume alignment technology'. Three-dimensional magnetic resonance imaging (MRI) uses a 'tracer' dye injected into tissue in order to highlight possible cancerous areas. Unfortunately, subtle changes in breast placement can make comparing

successive three-dimensional images very difficult.

But the DOD has faced similar problems when using varying 3-D views of the same target, and has developed a computerized technology to precisely align images for better comparison. HHS experts say the benefits to cancer research are obvious, since "precise alignment of these images becomes a key in more accurate identification of changes in breast tissue."

Blumenthal says all three technologies are expected to begin clinical trials at the University of Pennsylvania soon. If those trials look promising, Blumenthal says that approval for use in hospitals will be sought from the Food and Drug Administration.

Current breast mammography is a 40-year-old technology that misses up to 20% of cancerous tumors, according to a statement from HHS. "The clinical trials mean we can now start applying what we've learned... to the clinical setting, with the hope of finding breast cancer at an earlier stage," said Blumenthal.

According to government statistics, breast cancer affects 180,000 women annually in the U.S., causing 45,000 deaths each year. Early detection of breast cancer offers the best chance of long-term survival.

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Jan, FL1
Barbara

Schedule Request☐ ACCEPT☐ REGRET☐ PENDING

TO: Stephanie Street and Ann Walley, Directors
of Scheduling & Advance

FROM: Thurgood Marshall, Jr.
Secretary to the Cabinet

REQUEST: White House event

PURPOSE: To unveil the public service announcements
which will air during Breast Cancer Awareness
Month (October) and recognize the
public/private partnership involved in
educating women about the need for a
mammogram.

DATE AND TIME: The first week of October.

DURATION: 30 minutes.

LOCATION: White House

PARTICIPANTS: The First Lady, Secretary Shalala, HCFA
Administrator Nancy-Ann Min DeParle (upon
confirmation), PSA sponsors, and PSA actors.

OUTLINE OF EVENTS: Comments by First Lady, Secretary Shalala,
and HCFA Administrator. Play PSAs. Comments
from PSA actors.

REMARKS REQUIRED: Yes.

MEDIA COVERAGE: Yes.

RECOMMENDED BY: Secretary Donna Shalala

CONTACT: Barbara Woolley
Office of Public Liaison
456-2155

cc: Mary Beth Donahue, HHS
Liz Shannahan, HCFA

Schedule Request

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TO: Stephanie Street and Ann Walley, Directors
of Scheduling & Advance

FROM: Thurgood Marshall, Jr.
Secretary to the Cabinet

REQUEST: Request for First Lady to participate in a
Medicare Mammography event

PURPOSE: To promote the new Medicare Mammography event
in the context of Breast Cancer Awareness
Month.

DATE AND TIME: One day during the 2nd or 3rd week of
October, 1997. Time is flexible.

DURATION: 1-1.5 hours

LOCATION: "Your Medicare Center"
The Gallery (shopping center)
Philadelphia, PA

PARTICIPANTS: The First Lady; Secretary Donna Shalala; HCFA
Administrator Nancy-Ann Min DeParle (upon
confirmation)

OUTLINE OF EVENTS: The event would include a roundtable with the First Lady, Secretary Shalala, the Administrator, and "early detection" success stories. Participants would be women, and their family members, of diverse backgrounds whose use of the mammography benefit has resulted in early detection and treatment of breast cancer. Through education and outreach, the Administration and HHS are working to increase the use of mammography among older, minority women (research indicates they are least likely to use the benefit). HHS is involved in several efforts to increase awareness and utilization.

After the event, a tour of the first-of-its-kind Medicare service center operated by HCFA, could be arranged. Known as "Your Medicare Center", it is located in The Gallery shopping center. Visit would include meet and greet with staff and beneficiaries who have used the resources of the Center. (Closed press?).

REMARKS REQUIRED: Yes.

MEDIA COVERAGE: Yes.

RECOMMENDED BY: Secretary Donna Shalala

CONTACT: Barbara Woolley
Office of Public Liaison
456-2155

cc: Mary Beth Donahue, HHS
Liz Shannahan, HCFA

**OFFICE FOR WOMEN'S INITIATIVES AND OUTREACH**

TO: Jan Klein
FAX: 456-6244
DATE: 8/22/97

NUMBER OF PAGES (including cover sheet): 2

From: Cheri Carter, Acting Director
Sondra Seba, Agency Representative 6-7310
Robin Leeds, Agency Representative
Other

NOTES: Please attach the following
update of the Self magazine
request for the President (or Mrs. Clinton)
to accept the 1997 Pink Ribbon Award
in memory of Virginia Kelley in NY
sometime in October. Thanks — (SS)

THE WHITE HOUSE
OFFICE FOR WOMEN'S INITIATIVES AND OUTREACH
708 JACKSON PLACE, NW
WASHINGTON, DC 20503
PHONE:(202) 456-7300 FAX:(202) 456-7311

The information contained in this facsimile is CONFIDENTIAL and intended for the recipient ONLY. Please call if there are any problems with this transmission.

August 21, 1997

FAX TO: Ms. Sondra Seba
White House Office of Women's Initiatives
202-456-7311

FROM: Beth Fuchs Brenner
Publisher, SELF Magazine
212-880-7863

Dear Sondra:

It was great speaking to you today and we so appreciate your efforts to include the **SELF Pink Ribbon Awards Luncheon** on the President and/or First Lady's schedule(s) for what looks to be a very busy October.

As we discussed, we have been working with a tentative date for the luncheon, but there is certainly enough advance notice here to happily re-arrange things to accommodate the President and First Lady. The date we've been working with is Tuesday, October 21st, but we can move it either up or back depending on their travel schedules. As in the past two years, we have booked the Rainbow Room for this event but, here too, we can be flexible on the event location depending on your needs and concerns.

At this year's luncheon, we will be honoring the following companies for their commitment to the breast cancer research initiative:

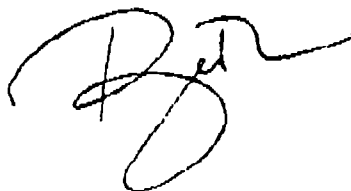
General Motors - for their ambitious "Concept Cure" program. The Award will be accepted by Phil Guarascio, V.P. General Manager, Marketing.

Kenar (the fashion company) - for their bold new breast cancer awareness program that has already raised substantial funds for the Breast Cancer Research Foundation. The Award will be accepted by Ken Zimmerman, president and ceo of Kenar.

WNBA (the new women's basketball league) - for their tremendous breast cancer awareness effort in this, their inaugural, season. Accepting the Award will be Val Ackerman, president of the WNBA.

We will also be presenting a special appreciation award to Carol Baldwin, mother of the actors Alec, Billy and Steven Baldwin, who has recently launched a fund-raising initiative toward a major new breast cancer in her name at the State University of New York at Stony Brook. It is quite possible that there will be WNBA athletes with us for the event, as well as one or more of the Baldwin boys. Naturally it is much too early to tell. And we are waiting on any more formal arrangements until we know if the President and/or First Lady can be with us to accept their Award in honor of the President's mother.

If you need any other preliminary information, please call me before you leave for vacation. I look forward to speaking again soon!



August 21, 1997

MEMORANDUM FOR ANN LEWIS

BOBBIE GREENE

✓ JEN KLEIN

NICOLE RABNER

CC: CHERYL CARTER
BARBARA WOOLLEY

FROM: SONDRA SEBA

SUBJECT: OCTOBER EVENT OPTIONS FOR THE FIRST LADY RELATIVE
TO NATIONAL BREAST CANCER AWARENESS MONTH

***SELF* Magazine's 1997 Pink Ribbon Award Luncheon in New York**

Our Office has a "pending" status on this scheduling request for the President to accept the 1997 Pink Ribbon Award in memory of his mother Virginia Kelley, at a luncheon sponsored by *SELF* magazine in New York City, sometime in October, to be determined by the President's schedule. This is an event option for the First Lady if the President is unable to attend. (See attached copy of scheduling request)

Women's Outreach Initiative at NASA

Our Office recently met with NASA representatives of the newly established Women's Outreach Team (part of Public Affairs Office) to find ways to collaborate on NASA's one-to-two year initiative in response to studies indicating that women are less favorable of the space program than men. The initiative's goal is to increase women's knowledge of how the space program improves their lives and the lives of their families. We discussed the possibility of co-sponsoring a briefing as a part of their formal initiative kick-off in January, 1998, as well as possibly incorporating their work on digital mammography into a Breast Cancer Awareness Month event in October. These events could introduce women leaders to: space-based research and programs on women's health, medicine and nutrition; technological advancements in consumer, home, safety, and travel products and services; and an understanding of the important contributions of preserving the health of Earth. (See attachment outlining NASA's initiative)

SCHEDULE PROPOSAL

APRIL 22, 1997

☐ ACCEPT

☐ REGRET

☒ PENDING

S/15

TO: Stephanie Streett

FROM: Maria Echaveste

REQUEST: For the President to attend an awards luncheon and to accept the 1997 Pink Ribbon Award from Self Magazine in memory of his mother, Virginia Kelley.

PURPOSE:

- To honor the President for his role in initiating legislation and in propelling this cause to the forefront of his agenda;
- To take note of the President's personal connection to the disease and of his commitment to the fight against breast cancer and the promotion of women's health in a public forum; and,
- To further demonstrate the Administration's priority of elevating breast cancer awareness.

BACKGROUND: Self Magazine is the leading women's health magazine in the United States. They have a circulation of 1.6 million and a readership of over five million. Self is the creator of the Pink Ribbon, the national symbol for breast cancer awareness.

October is Breast Cancer Awareness Month. The Pink Ribbon Award, established in October 1994, honors outstanding individuals and organizations for their shared dedication and commitment to the fight against breast cancer.

Past recipients of the Pink Ribbon Award include Evelyn H. Lauder, for developing the Evelyn H. Lauder Breast Center at the Memorial Sloan-Kettering Hospital in New York, and Jerry Levin, former president and CEO of Revlon, for Revlon's establishment of the Revlon/UCLA Breast Center in Los Angeles.

PARTICIPANTS: Approximately 500 in the audience including:

- Advocates
- Breast cancer survivors
- Corporate and government representatives

DATE AND TIME: October, 1997; exact date and time TBD, flexible for the President.

BRIEFING TIME: 5 minutes

DURATION: TBD.

LOCATION: Washington, D.C. or New York City; exact location TBD.

PREVIOUS PARTICIPATION: None.

OUTLINE OF EVENTS: TBD.

REMARKS REQUIRED: Yes, to be provided by the principal's speechwriters; talking points provided by the Women's Office upon request.

MEDIA COVERAGE: Open.

RECOMMENDED BY: Betsy Myers.

CONTACT: Sondra Seba, Ph. 6-7310.

ORIGIN OF PROPOSAL: Self Magazine.

SELF

magazine

BETH FUCHS BRENNER
PUBLISHER

March 3, 1997

Ms. Mary Dickson
White House Office for Women's Initiatives & Outreach
708 Jackson Place
Washington, DC 20503

Dear Mary:

Thanks to you and Pat for spending time with Rochelle, Andrea, Judy, Sue and me yesterday, and for your enthusiasm for the proposed breast cancer awareness programs we put on the table.

As promised, I am following up with some detailed information on SELF's Pink Ribbon Award.

Three years after SELF's launch of the Pink Ribbon as the national symbol for breast cancer awareness, SELF initiated the Pink Ribbon Award in October 1994. Every October, the Pink Ribbon Award luncheon honors outstanding individuals and organizations for their shared dedication and commitment to the fight against breast cancer. We would be honored to present the 1997 Pink Ribbon Award to President Clinton, in memory of his mother, Virginia Kelley. The President's role both in initiating legislation and in propelling this cause to the forefront of his agenda is deserving of our acknowledgment; and his personal connection to the disease is well worth noting in a public forum.

Past honorees, all distinguished business leaders, include:

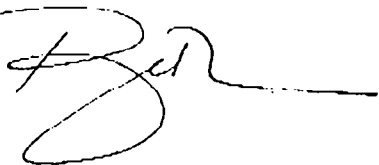
- 1994 Pink Ribbon Award recipient Evelyn H. Lauder, who was acknowledged for her partnership in initiating the Pink Ribbon and her tremendous work in developing the Evelyn H. Lauder Breast Center at the Memorial Sloan-Kettering Hospital. Dr. Larry Norton, Director of The Lauder Breast Center, also spoke at the luncheon.
- 1995 Pink Ribbon Award recipient Jerry Levin, then president and CEO of Revlon, who accepted the Award on behalf of all Revlon employees and was honored for Revlon's establishment of the Revlon/UCLA Breast Center in Los Angeles. Dr. Susan Love, renowned breast cancer surgeon at UCLA and best-selling author of "The Breast Book", accompanied Mr. Levin to the podium.

- 1996 Pink Ribbon Award recipient James Preston, Chairman & CEO of Avon, who was honored for Avon's tremendously galvanizing Breast Cancer Awareness Crusade - developed to educate women about breast health and to improve access to early detection services. Since 1993, Avon has raised over \$18 million to fund numerous community-based programs across the U.S. and worldwide.
- In 1996, SELF also established the Pink Ribbon Award for New Initiatives and honored two additional individuals and their companies for impactful new breast cancer programs. The Lee Jeans "Blueprint" Initiative, established in Spring 1996, raised over \$3 million for the Susan B. Komen Foundation in its first year, primarily through National Denim Day, a nationwide event for breast cancer awareness that required companies to allow their employees to wear denim to work on October 25th in exchange for a \$5 donation, per employee, toward breast cancer research. SELF also presented the Pink Ribbon New Initiatives Award to Maidenform, whose sponsorship of an initiative called "Two Chicks, Two Bikes, One Cause" led young women on a cross-country cycling trek to raise awareness for breast cancer through educational forums, picnics and bike rides. The trek covered 4,400 miles through 17 states.
- Additionally in 1996, SELF honored ABC producer Geralyn Lucas who, at 28, was diagnosed with breast cancer and has made it her mission to empower other women with cancer to take control of their treatment and their emotional recovery.

In just three years, the Pink Ribbon Awards luncheon has grown in size from 70 to over 200 attendees. The audience is composed of distinguished business leaders, health care professionals, breast cancer survivors and the press. As discussed, we are prepared to move the Awards luncheon to a larger ballroom to accommodate additional guests.

I'm sure we'll be in touch soon regarding the status of this Award, as well as our other proposals. Thanks again for all your time and I look forward to working together.

Sincerely yours,



cc: Pat Lewis - Director Of Specialty Press, The White House
Rochelle Udell - Editor-in-Chief, SELF
Andrea Kaplan - Director of Public Relations, SELF

Draft: 8/5/97
Author: Terri Hudkins

Public Affairs

1997-99 Outreach Strategic Plan

Connecting with Women

NASA's Office of Public Affairs has initiated a proactive endeavor to reach women. This initiative originated, in part, due to several studies that indicate women are less supportive and less favorable of the space program than men.

The objective of the initiative is to increase women's knowledge of how the space program improves their lives and the lives of their families.

Other data indicate that, of the general population, educated Americans and younger Americans seem to be more supportive. Possible reasons for the less favorable attitude may include the perceived high cost and an unawareness of the breadth of programs, discoveries, and benefits.

Research has shown that women are mostly concerned about issues related to health, medicine, nutrition, education, the environment, aging and older Americans, security and crime, and consumer productions and services.

Statistics

A 1996 public opinion study conducted by Yankelovich Partners indicates that 49 percent of women, compared to 62 percent of men, think the space program is extremely or very important. Thirty percent of men, compared to 18 percent of women, have a very favorable impression of the space program. When asked about funding space, 48 percent of women and 37 percent of men believe we spend too much. When asked whether money spent on space could be better spent on other programs, 72 percent of women and 55 percent of men strongly agree and somewhat agree.

Proposed Plan

Convene several major campaigns in the next year focusing on space-based research and women's health, medicine and nutrition; understanding, preserving and forecasting the health of Earth; technology advancements in consumer, home, safety, travel, and leisure products and services. The primary audience is American women aged 30-55, parents and families. The scope of the campaigns will vary and will be supplemented with broadcast and print media events and feature stories; public programs such as exhibits, speaking platforms, and conferences; internet initiatives; and partnerships with associations and groups.

Public Affairs

1997-99 Outreach Strategic Plan

Connecting with Women

Objective: American women have greater awareness of space

Statistics: Studies indicate women are less supportive and less favorable of the space program than men.

Audience:

primary: Women
Subgroups Parents and Families

Message: NASA science and research improves the lives of women and the lives of their families.

An investment in space is an investment in our current standard of living, our knowledge of our place in the universe and in our children's future.

Themes: America's space program is making important contributions to:

- advancing health care, nutrition and medical sciences.
- understanding and preserving the health of Earth
- forecasting weather and understanding natural disasters
- inspiring students with discovery and adventure
- enriching educators with math, science and technology tools
- making the skies safer for travel
- applying technology to advance consumer, home, safety and leisure products and services
- creating jobs of the future
- unlocking the mystery of the universe

Slogan: *There's Space in My Life*

Strategy: Develop an integrated public affairs plan centered around a main message. Create opportunities around significant NASA events for women. All components are formatted in the same "family," yet all text and visuals are tailored for different special interest groups. Reach and communicate messages to variety of decision makers, media and special interest groups.

Strategic Plan Components

Broadcast Media

- (1) entertainment initiatives
- (2) monthly videofile feature stories

Print Media

- (1) magazine features
- (3) editorials and column
- (4) PSA campaign

Internet Media

- (1) web site for families
- (2) collaborative chats, events, online projects

Public Programs

- (1) exhibits at conventions and trade shows
- (2) partnerships and campaigns
- (3) speaking platforms
- (4) conferences on women's issues
- (5) women artists

Decisionmakers and Industry Leaders

- (1) Administrator breakfast meetings with decisionmakers
- (2) industry leaders and publishers to launch
- (3) speaking platforms

Support Products and People

- (1) print materials
- (2) video materials
- (3) spokespersons
- (4) tailored exhibits
- (5) calendar of NASA events
- (6) calendar of interest group events
- (8) website with links to "cool" websites

NASA'S ROLE IN HEALTH AND MEDICINE

MATTERS OF THE HEART AND BODY

Blood Pressure

NASA's research led to the development of that device which you slip your arm into at the doctors offices and supermarkets. This is a semi-automatic device that provides highly accurate blood pressure measurement. The results appear quickly and conveniently on a digital display.

Programmable Pacemaker

A pacemaker that can be programmed outside of the body and a companion instrument, the implantable defibrillator, has been developed by NASA to sense irregular heart beats and automatically delivers an electrical stimulus to correct the problem.

Laser Angioplasty

NASA's patented technology offers an alternative to conventional methods of treating clogged arteries. An excimer laser offers a non-surgical cleaning of the arteries without causing damage to blood vessel walls. This technique has a 85% success rate with fewer complications than balloon angioplasty.

Cardiac Monitor

The IQ System used for cardiac monitoring evolved from NASA's quest for a less complex method to monitor the hearts of astronauts in orbit. The system is a simple non-invasive and less costly way of assessing cardiac functions which is being used in hospital Intensive Care Units, emergency rooms and laboratories in and outside of our country.

Breast Cancer Detection

Women can feel more comfortable knowing there is a new way to screen breast cancer that will provide earlier diagnosis than the current procedure with lesser exposure to radiation. NASA has developed a joint program with the National Cancer Institute to use NASA technology to develop digital mammography.

Stereotactic Biopsy

A charge-couple device camera originally designed and built for use in the Hubble Space Telescope Imaging Spectrograph has proven beneficial to patients and the doctors when performing breast biopsies. The camera provides a much clearer image and greater accuracy for physicians when collecting the biopsy sample from a suspicious lesion seen on x-ray. This method takes some of the dread out of having a biopsy because it is non-surgical, less costly, and painless.

HEART AND BODY CONT'D

Endometriosis

Endometriosis is a condition that afflicts approximately 10 percent of women and 25-40 percent of infertile women. It is characterized by growth of tissue outside of the lining of the uterus in sites such as the fallopian tubes or ovaries. Information gathered by NASA scientists have given the medical community a better understanding of the effects of radiation in treating this often painful condition and its causes.

Fetal Telemetry Monitoring System

Additional care is available for women carrying fetuses suffering from diaphragmatic hernia, a condition in which a hole in the diaphragm allows internal organs to move from the stomach into the chest. This condition is critical and is sometimes fatal because the lungs have insufficient room to develop. NASA's Ames Research Center and the University of California have devised a wireless telemetry device that monitors the baby's vital signs until after the mother has delivered and the baby is stable.

Infrared Thermometer

Technology used to measure the temperature of stars and planets proves useful in measuring humans' temperature in only two seconds. This is an infection free method of measuring body temperature through the eardrum which is beneficial to newborns, critically ill and incapacitated patients.

Osteoporosis

NASA with the National Institute of Health technology could possibly provide some relief to women who have "bone-chilling" concerns about osteoporosis. Studies that are being done on the loss of bone mass in space travel could be advantageous in preventing and treating this disease that accompanies aging on earth.

Ocular Screening System

NASA's focus on image processing and optic technologies lead to the development of the Ocular Screening System which is used for the detection of "Lazy Eye" a condition which causes blindness if not detected early. The system allows for low-cost examinations which disclose any other eye abnormalities such as nearsightedness, farsightedness, or cataracts. It can also be used on infants.

Computer Reader for the Blind

Blind people have more independence thanks to optical and electronic technology research performed at Stanford Research Institute under the sponsorship of NASA's Ames Research Center. The device, called Optacon II, provides access to printed words and electronic information on most personal computers. It has widespread use because it can be used with any alphabet or language and is available in more than 70 countries throughout the world.

HEART AND BODY CONT'D

Speech Aids

The deaf can now visualize what they are saying in a manner different from sign language. The Resnik Speech Teacher is a device that aids in speaking by showing the hearing impaired through a display what is normal voice tone versus what is higher than normal. This device and another one called Resnick Tone Emitter I, a miniature electronic device that works like a human voice to help people to speak who have lost their natural voice through injury, cancer or other diseases, were made possible through NASA Regional Technology Transfer Center.

Diabetes Research

Human insulin mixed with a drug that improves the therapeutic effect of insulin and improved the structure was based on space grown crystals. Scientists are currently working on designing non-toxic drugs that bind to the insulin and allow its use on diabetic patients.

A biopharmaceutical company is using NASA-developed technology to grow human insulin-secreting pancreas cells for the treatment of diabetes. This approach could replace insulin therapy by using a NASA bioreactor that may be critical to providing a source of functional human pancreatic tissue.

Bladder Fullness Monitor

There are millions of people in our country who have a bladder control problem because of various medical conditions. Embarrassment and other negative effects usually associated with this condition can be eliminated. NASA's Langley Research Center developed a small, battery-powered instrument which can be positioned on the abdomen and alerts patients when they need to void. This small device can improve the quality of life for people who have this condition.

Balance Disorders

NASA along with NIH have found ways to support aging persons who have balance disorders, a frequent cause of falls and subsequent bone breakage. Space Shuttle research on the body's balance system has resulted in new discoveries of sensory pathways and the nervous system's ability to adapt. Increased understanding of the brain may aid in the development of improved treatments for nervous system disorders.

Food and Drug Administration

5600 Fishers Lane, Room 15-61
Rockville, MD 20857

OFFICE OF WOMEN'S HEALTH

Facsimile Transmission Record

Telephone (301) 827-0350 IMMEDIATELY if re-transmission is necessary.

TO: Jennifer Klein
(202) 456-6244

FROM: Audrey Sheppard
Acting Director

1

Number of Pages
(Not including cover page)



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
Rockville MD 20857

August 21, 1997

MEMORANDUM TO MELANNE VERVEER AND MARIA ECHAVESTE

CC: JENNIFER KLEIN AND BARBARA WOOLLEY

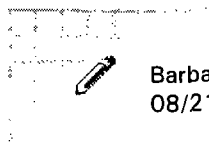
FROM: AUDREY SHEPPARD, ACTING DIRECTOR
OFFICE OF WOMEN'S HEALTH

SUBJECT: FIRST LADY EVENT DURING BREAST CANCER AWARENESS MONTH

It is the recommendation of the Food and Drug Administration that the event to kick-off Breast Cancer Awareness Month with First Lady Hillary Rodham Clinton be focused on the importance of mammography screening. It is our belief that with the pending reauthorization of the Mammography Quality Standards Act (MQSA), due for Hill consideration after Labor Day, and the finalization of the final regulations of MQSA, currently at OMB and the Department, it is perfect timing for the White House to spotlight the importance of mammography services.

Since there is not currently a cure for breast cancer, the most effective focus is on early detection. Increasing awareness among women is needed about quality mammography services. Since October 1, 1994, all mammography facilities in the United States have been required to be certified by the FDA as meeting mammography quality standards in order to lawfully operate. This requirement is a result of MQSA. The goal of MQSA is to assure that mammography is safe and reliable and to allow the detection of breast cancer in its earliest, most treatable stage. MQSA has resulted in better mammography screenings and lives have been saved.

According to the National Cancer Institute, in 1992 only 51% of White women, 45% of Hispanic women and 40% of African American women ages 50-64 had received a mammography screening within the last year. At ages 60 years and above the numbers are even lower at 42% for White women, 32% for African American women, and 30% of Hispanic women. We still have a long way to go in order to reach the *Healthy People 2000* goal of mammography screening for 60 percent of all women ages 50 and older.



Barbara D. Woolley
08/21/97 07:09:38 PM

Record Type: Record

To: Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP

cc:

Subject: Breast Cancer Awareness Month and Medicare Mammography Initiative

JoAnne Howes is out of the country until Sept. 2. It is my understanding Robin Leeds talked with her earlier about October.

-

August 21, 1997

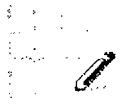
MEMORANDUM FOR JENNIFER KLEIG
NICOLE RABNER

FROM: BARBARA WOOLLEY

RE: NATIONAL BREAST CANCER AWARENESS MONTH

Medicare Mammography Initiative

- Option 1: First Lady participates in an event in Philadelphia, or other HCFA designated site, to re-announce the Medicare Mammography Initiative. The announcement will include the introduction of a new PSA; new data on Medicare beneficiaries using the Mammography benefit; and, Corporate Commitments on the Medicare Mammography Initiative.
- Option 2: First Lady participates in an White House event regarding the above. Audience would be comprised of Corporate partners; HHS officials; Legislative Members; Advocates of the Women's, Breast Cancer, Provider, Seniors and Health Communities. Message targeted to Medicare message only.
- Option 3: SELF Magazine's 1997 Pink Ribbon Award could be presented to the First Lady, on behalf of the President, in conjunction with the Medicare Mammography Initiative Announcement. Message brings in both the Medicare and Breast Cancer Awareness Month.



Barbara D. Woolley
08/28/97 02:59:33 PM

Record Type: Record

To: Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP, Marsha E. Berry/WHO/EOP

cc:

Subject: Medicare Mammography Initiative

FYI, Candice Bergan would like to participate in an interactive PSA with the First Lady for the MMI. A draft script is coming to us, as soon as I receive it will put together a proposal for a second PSA for the MMI. Should you decide to do it, Candice Bergan's folks need to schedule ASAP. She would be available to participate in the event if it is scheduled after October 20, 1997.

For the first PSA, we have confirmed Stephan Baldwin and his mother. Working on Whitney Houston and her Mother; Andy Garcia and his Mother; and Rosanne Cash and June Carter Cash.

Schedule Proposal

Date: August 15, 1997

<u> </u> ACCEPT	<u> </u> REGRET	<u> </u> PENDING
--------------------------	--------------------------	---------------------------

TO: Patti Solis-Doyle
Assistant to the First Lady
and Director of Scheduling

FROM: Maria Echaveste
Barbara Woolley

REQUEST: For the First Lady to speak at a breakfast a small group of representatives from the American Health Foundation to honor October 6 as an Annual Child Health Day (CHD)

PURPOSE: To provide visibility to the First Lady's commitment to children's health issues by establishing a nationwide health awareness/action day for children and families.

BACKGROUND: The American Health Foundation (AHF) is a non-profit research and health promotion organization dedicated to saving lives through the prevention of cancer and other life threatening illnesses. The Foundation conducts basic and clinical research to identify the causes of these diseases and develops health education programs to foster healthier lifestyle practices. The AHF maintains the support of important children's health organizations including the American Academy of Pediatrics and the Children's Defense Fund.

This year's theme is "Take Time for Family." The AHF is urging families to commit to engaging in healthful habits all year long beginning on Child Health Day, by signing a Healthy Practices Pledge. Families will pledge to:

- Have a healthy breakfast
- Stop smoking
- Engage in physical activities
- Live and play safely
- Take care of their teeth

The AHF is enlisting the support of the corporate community to give their employees thirty minutes off on Child Health Day to have breakfast with their families at

home or at school.

DATE AND TIME: Monday, October 6, 1997.

DURATION: 20 minutes.

LOCATION: White House.

PARTICIPANTS: List Attached.

OUTLINE OF EVENT: TBD.

PRESS/MEDIA: White House Photo or Open.

RECOMMENDED BY: Maria Echaveste

CONTACT: Barbara Woolley, x62155

Schedule Request ACCEPT REGRET PENDING

TO: Stephanie Street and Ann Walley, Directors
of Scheduling & Advance

FROM: Thurgood Marshall, Jr.
Secretary to the Cabinet

REQUEST: White House event

PURPOSE: To unveil the public service announcements
which will air during Breast Cancer Awareness
Month (October) and recognize the
public/private partnership involved in
educating women about the need for a
mammogram.

DATE AND TIME: The first week of October.

DURATION: 30 minutes.

LOCATION: White House

PARTICIPANTS: The First Lady, Secretary Shalala, HCFA
Administrator Nancy-Ann Min DeParle (upon
confirmation), PSA sponsors, and PSA actors.

OUTLINE OF EVENTS: Comments by First Lady, Secretary Shalala,
and HCFA Administrator. Play PSAs. Comments
from PSA actors.

REMARKS REQUIRED: Yes.

MEDIA COVERAGE: Yes.

RECOMMENDED BY: Secretary Donna Shalala

CONTACT: Barbara Woolley
Office of Public Liaison
456-2155

cc: Mary Beth Donahue, HHS
Liz Shannahan, HCFA

Schedule Request ACCEPT REGRET PENDING

TO: Stephanie Street and Ann Walley, Directors
of Scheduling & Advance

FROM: Thurgood Marshall, Jr.
Secretary to the Cabinet

REQUEST: Request for First Lady to participate in a
Medicare Mammography event

PURPOSE: To promote the new Medicare Mammography event
in the context of Breast Cancer Awareness
Month.

DATE AND TIME: One day during the 2nd or 3rd week of
October, 1997. Time is flexible.

DURATION: 1-1.5 hours

LOCATION: "Your Medicare Center"
The Gallery (shopping center)
Philadelphia, PA

PARTICIPANTS: The First Lady; Secretary Donna Shalala; HCFA
Administrator Nancy-Ann Min DeParle (upon
confirmation)

OUTLINE OF EVENTS: The event would include a roundtable with the First Lady, Secretary Shalala, the Administrator, and "early detection" success stories. Participants would be women, and their family members, of diverse backgrounds whose use of the mammography benefit has resulted in early detection and treatment of breast cancer. Through education and outreach, the Administration and HHS are working to increase the use of mammography among older, minority women (research indicates they are least likely to use the benefit). HHS is involved in several efforts to increase awareness and utilization.

After the event, a tour of the first-of-its-kind Medicare service center operated by HCFA, could be arranged. Known as "Your Medicare Center", it is located in The Gallery shopping center. Visit would include meet and greet with staff and beneficiaries who have used the resources of the Center. (Closed press?).

REMARKS REQUIRED: Yes.

MEDIA COVERAGE: Yes.

RECOMMENDED BY: Secretary Donna Shalala

CONTACT: Barbara Woolley
Office of Public Liaison
456-2155

cc: Mary Beth Donahue, HHS
Liz Shannahan, HCFA

Missiles to mammograms: New uses for technology

By DELIA M. RIOS
NEWHOUSE NEWS SERVICE

WASHINGTON — The human breast is not the frontier that scientists at the SETI Institute — as in the Search for Extra-Terrestrial Intelligence — usually explore.

Scientists there are known for devising a way for even the faintest radio signals from space to cut through the backdrop of noise that surrounds us. But, it turns out, the cancerous breast sends its own elusive signals that radiologists strain to see against the denseness of healthy tissue, especially in mammograms of younger women.

This is where the two frontiers intersect.

Dr. Kent Cullers, a SETI scientist, is applying to mammograms the same technology he uses to listen to space. Except that in this research, partly funded by NASA, he is searching for the tell tale "visual sounds" of cancer. The cancer apparently gives off a different signal within the varied depths of breast tissue.

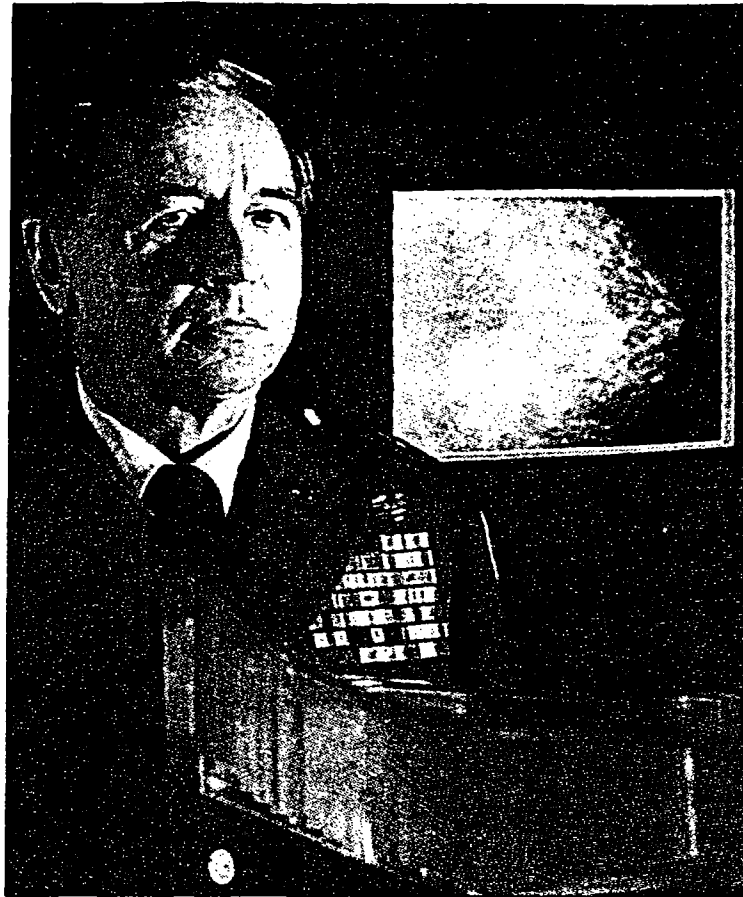
Joan Vernikos, NASA's Life Sciences Division director, excitedly calls Culler's work "extremely promising."

Excitement reverberates not only in NASA offices, but in the Department of Defense and throughout what is obliquely referred to as "the intelligence community" as technology once directed at military targets or the mysteries of space is now zeroing in on cancerous tissue in human breasts.

There is a sense that new weapons in the battle against breast cancer are on the verge of being made available to women and their doctors.

It has been three years since the Office on Women's Health in the U.S. Public Health Service initiated "technology transfer" conversations with the Department of Defense, the CIA and NASA.

Now, at least two clinical trials are nearing completion. And there are projections that new diagnostic technologies are only one to two years away from use in



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Army Gen. Russ Zajtchuk, commanding general of Medical Research and Materiel Command, directed the development of the \$2 million Mobile Breast Care Center, designed to get technology to women without access to medical facilities.

breast care centers. Institutions such as the University of Chicago, the University of Pennsylvania Medical School, Harvard Medical School and Massachusetts General Hospital have been actively involved in moving the research forward.

"We are really on the border, and we're getting closer," says Dr. Daniel B. Kopans, director of the Breast Imaging Division at Massachusetts General Hospital and an associate professor of radiology at Harvard Medical

School.

'Missiles to Mammograms'

What is most promising is how space, defense and intelligence technology allows the unprecedented mapping of the landscape of the breast. This was the hope touted three years ago when the project, dubbed "From Missiles to Mammograms," was launched.

"What we call diagnosis, they call identification; we read images and they exploit them; they're talking about looking for



NEWHOUSE NEWS SERVICE

Dr. Susan Blumenthal, deputy assistant secretary for women's health in the Department of Health and Human Services: "With the end of the cold war, our new national enemies are diseases like breast cancer."

buildings, silos, tanks and planes and we look for tumors," says Dr. Mitchell Schnall of the University of Pennsylvania. He is the primary investigator for the clinical trials.

"The problems are the same," he says. "It's just a matter of what the target is."

The technologies now in clinical trials involve computer-aided diagnosis and magnetic resonance imaging (MRI). In the first case, the computer acts as a backup for a radiologist reading a mammogram. The computer not only points out what the radiologist might not see, but using intelligence technology, also learns where false readings are likely to occur and so cuts down on false alarms. It spots false readings in much the same way as high-tech military surveillance knows that buildings tend to be near roadways. Researchers expect to com-

plete this trial by December or January.

The second technology being tested enhances MRI scans for cancer. In an MRI, a contrast dye is injected to pinpoint blood supply to tissues. Cancerous tumors "grow" their own blood supply network.

But alignment of before and after images must be precise. And that's where intelligence work comes in. Looking for breast tissue changes works in the same way that intelligence experts compare images to see if tanks have moved through an area from one day to the next.

Kopans estimates that, conceivably, computer-aided diagnosis and digital mammography, which results in sharper images than X-ray films, may be available for clinical use in the next year or two. He expects the more sophisticated MRI contrast technology to become available over the next several years.

"Looking for cancer in a mammogram is like looking for trees in a forest," Kopans explains. "If we can move the other trees out of the way, we can see the one we're looking for."

These are considerable technological leaps, considering that the best diagnostic screening method for breast cancer today, X-ray mammography, is four decades old and prone to misdiagnosis. The X-ray film images miss 15 percent to 20 percent of cancers, according to the Office on Women's Health. And because three out of four tumors identified in mammograms are not cancerous, women often are subjected to unnecessary surgical biopsies.

Early detection is critical. A woman's life literally depends upon it. And so recent controversies over when and how often women should get mammograms have heightened concerns about the imprecision of the diagnostic techniques now used. That is especially true for younger women. The denseness of their breast tissue frustrates radiologists trying to get reliable readings.

Targeting technology

The technology necessary to

perfect diagnostic breast screening did exist, but not in the right hands. The defense and intelligence communities, with big budgets and national security as their mission, are estimated to be 10 years ahead of the medical field in their development and use of high-tech imaging.

By picking up the telephone and calling the Department of Defense, the CIA and NASA, Dr. Susan Blumenthal set out in 1994 to do something about that. As the first deputy assistant secretary for women's health in the Department of Health and Human Services, she has acted as both catalyst and booster for the technology transfer now taking place.

"With the end of the Cold War, our new national enemies are diseases like breast cancer," Blumenthal says.

The whole enterprise is cloaked in a sense of mission.

Army Gen. Russ Zajtchuk is commanding general of Medical Research and Materiel Command at Fort Detrick, Md. Under his direction, and in a partnership with Blumenthal's office, the Mobile Breast Care Center has been developed. It uses digital mammography, as opposed to X-ray film, and so can get sharper pictures and a more accurate diagnosis.

The \$2 million van, which carries a sign with the names of the Department of Health and Human Services and the Department of Defense, is designed to take technology to women who do not have access to breast centers. The images can be transmitted by satellite in minutes and, if necessary, a needle biopsy can be performed right there.

"On the defense side, we're certainly helping the entire country from a defense and security stance," says Victor Korsun, division vice president for special programs at the National Information Display Laboratory in Princeton, N.J., which does intelligence research for the Department of Defense and the CIA. "And here we were actually beginning to help individuals, in this case women, who are half the country."

Updated: 8/20/97

Medicare Mammography Initiative National and Corporate Commitments

National Sponsors

- * Avon (tentative)
- * Bristol Meyers Squibb (tentative)
- * Eli Lilly (tentative)
- * Zenecca, Inc.

Corporate Sponsors

- * American Airlines
- * American Association of Health Plans:

Group Health Cooperative, Eau Claire, WI
MD Health Plan, North Haven, CT
FHP Inc., Phoenix, AZ
PrimeHealth, Mobile, AL
Pro-West, Seattle, WA
Principal Health Care of the Carolinas, Charlotte, NC
Colorado Access, Denver, CO
Principal Health Care, Inc., Bethesda, MD
PersonalCare, Champaign, IL
Neighborhood Health Partnership, Miami, FL
PacifiCare, Dallas, TX
Group Health Northwest, Spokane, WA
Louisiana Managed Health Care Association, Baton Rouge, LA
Medica Health Plans, Minneapolis, MN
Staywell, Centerline, MI
Florida Association of Health Maintenance

- * American Greeting
*Present Point-of-Purchase display for use in Mother's Day cards.
Include special "reminder" card in greetings.
Efforts reach 30,000 stores.*
- * BE & K Engineering
Provided free mammograms to employees and their spouses for Mother's Day.
- * Chrysler Corporation
*Place MMI message on shower cards.
Distribute information in Chrysler Corporation "Wellness Offices."*
- * Direct Selling Association/Shaklee Corporation
- * Eastman Kodak Company
*Distribute information with Supplement piece in September/October Newsletter,
reaches 50,000 retirees.
Distribute 7,000 posters to communities with EK plants.*
- * Food Marketing Institute
Develop brochure that Urban League will distribute to membership.
- * J.C. Penny
*Distribute material through policy holder life insurance. Reach 1 million people.
Distribute material in October credit mailing. Reaches 15-20 million. Costs \$2
million in sales.
Distribute material through Eckard Drug/Thrift Drug Stores. Reaches 1,000
stores.*
- * Maidenform, Inc.
*Place 11/14 posters/signs in dressing rooms in 100 outlet stores for Mother's
Day.*
- * National Association of Chain Drug Stores
*Produce 2/3 minute VNR with an abbreviated version (30 to 60 seconds) for retail
of worksite.
Distribute posters, flyers, Q & A, "Did You Know" for October to 30,000 stores.*
- * National Community Pharmacists Association
*Place an announcement in September or October issue of Association
publications (monthly journal and newsletter), circulation: approximately
40,000. Provide information on how to obtain media kits.
Announce the White House Medicare Mammography Initiative during General
Session at NAPA Annual Convention, October 25-29, 1997, attendance:
approximately 5,000.*

- * Pitney Bowes
*Provide on-site mammograms for female employees over 35.
Work with area hospital on providing mammograms for uninsured
and indigent women.*
- * YWCA
*Distribute literature at "Race for Cure" highlighting Medicare Mammography
information (Mother's Day).*
- * Wal-Mart
*Print MMI message on store receipts during the month of October. Message
will be read by Wal-Mart's 700,000 associates and 70 million shoppers
during the month of October.*

Approved:

For:

Date:



Barbara D. Woolley
08/19/97 05:31:12 PM

Record Type: Record

To: Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP, Marsha E. Berry/WHO/EOP

cc:

Subject: Medicare Mammography Participants

List of Participants from HHS, HCFA, AOA, FDA, NCI.

Michele, Amberson

Lois Albarelli

Laurie Boeder, HHS Press Office

John Burklow

Pamela, Gentry, HCFA Press Office

Jackie Nedell, HHS Press Office

Hugh Christopher Peacock

Valerie Scardino

Liz Shannahan, HCFA

Melissa Taylor

Nancy Wartow

Stephen W. Wyatt

Ta Zitans, HCFA

Susan Blumenthal, Office of Women's Health

Tamar Small, Provalent Communications

Draft Proposal

Launch of NCI's Breast Cancer/Mammography Campaign and DHHS Breast Cancer Programs

Goal:

Demonstrate full DHHS response to breast cancer concerns--from basic science research on cancer genetics through outreach programs to reach underserved populations with screening mammograms for women in their forties and older.

Federal Agencies: The following have expressed interest in participating:

- National Cancer Institute
- Centers For Disease Control and Prevention
- Food and Drug Administration
- Health Care Financing Administration
- Agency for Health Care Policy and Research
- PHS -- Office on Women's Health
- Administration on Aging

Audiences:

- Media: broadcast, print and newsletters/publications of breast cancer and other cancer organizations
- Partners and advocates in the effort to reduce breast cancer
- State and local health agency leaders
- Health professional and cancer research organizations
- Policy makers and interested public
- General public; women at risk for breast cancer

Messages:

1. Showcase, through presentations and exhibits, full range of government response to breast cancer.
2. Reinforce new mammography recommendations:
 - If you are in your forties or older, get a mammogram on a regular basis, every 1 to 2 years.
 - Consider risk factors for breast cancer and the benefits & limitations of screening mammograms.
3. Provide contact information to facilitate collaboration and interaction across government agencies and to facilitate consumer interaction with government programs.
4. Promote NCI's Cancer Information Service as a comprehensive source of information for the public about breast cancer (and other cancer issues).

Format:

- DHHS Secretary Shalala and NCI's Dr. Klausner host ½ day session on NIH campus, Natcher building auditorium. Principals of each agency involved in breast cancer attend and participate. Each agency briefs attendees on their role and has opportunity to exhibit and distribute material.
- Invite groups concerned about breast cancer, including advocacy groups, consumer organizations and health professional groups. A number of organizations will be invited; this is not an exclusive event.
- Invite media covering breast cancer/women's health issues. The event is an opportunity to observe, gather full breadth of government response, and meet and talk with a wide variety organizations involved in breast cancer issues in advance of NBCAM. The event itself is not likely to generate significant coverage - it lacks a news hook. The information provided, however, will provide a basis for news articles and feature stories.

Special Materials for Event/Mailing to Organizations:

- Program Resource Folder
- Cover letter (for mailings)
- Press Statement -- statement outlining NCI's breast cancer/mammography campaign and DHHS breast cancer programs.
- Screening mammograms Q & A -- questions and answers about screening mammograms and breast cancer, as well as information on risk factors for breast cancer.
- Stat Bites -- camera-ready information on the incidence of breast cancer, breast cancer risk, and mammography screening rates.
- Sources of Breast Cancer and Mammography Information and Background Information about Event Participants -- document outlining the resources available through each participating DHHS agency.
- Summary of Breast Cancer Screening Clinical Studies -- data from the American, Swedish, Canadian, and Edinburgh (UK) randomized breast cancer clinical studies.
- Feedback Fax Form -- form to be faxed back allowing users to describe the usefulness of packet materials.

Tailored Mailing to Health Professional Groups:

- Selected resources from above
- Physician's Pad -- tablet with information about breast cancer and screening mammograms for health care professionals to share with women.

Additional Resources:

- ANR -- Audio news release for distribution during the event.
- B-roll/VNR -- filmed footage for distribution during the event
- Internet
- Spokespeople
- New publications from the NCI and other agencies/offices

August 13, 1997

**Medicare Mammography Initiative
Editors' Commitments
Updated 8/20/97**

WOMEN'S MAGAZINES:

<i>Child</i>	Pamela Abrams	Plans to include article in November issue. Circulation: 740 thousand.
<i>Cosmopolitan</i>	Bonnie Fuller	Plans to include a large feature in October issue ("A to Z" of Breast Cancer). Circulation: 2 million.
<i>Elle</i>	Elaina Richardson	Plans to include MMI article in October issue. Circulation: 900 thousand.
<i>Family Circle</i>	Susan Ungaro	Plans to include a report on breast cancer in October issue. Circulation: 5 million.
<i>Fitness</i>	Sally Lee	Plans to address MMI in October issue. Circulation: 750 thousand.
<i>Good Housekeeping</i>	Diane Salvatore	Plans to address breast cancer and MMI in October. November editor's article will address MMI. Circulation: 5 million.
<i>Healthy Living</i> <i>Country Living</i>	Rachel Newman	Plans to print an article on MMI in the November issue. Provides free mammograms to employees. Circulation: 1.6 million.
<i>Heart and Soul</i>	Stephanie Stokes Oliver	Plans to devote October editor's column to her visit to the White House, including MMI. Circulation: 260 thousand.

<i>Ladies' Home Journal</i>	Susan Crandell	Plans to cover MMI in October issue. Circulation: 17 million.
<i>Latina</i>	Patricia Duarte	Plans to run feature article in either November or December issue. Circulation: 300 thousand.
<i>Latina Style</i>	Jerry Berrios	Plans to run an article on MMI in October issue. Circulation: 150 thousand.
<i>Mademoiselle</i>	Elizabeth Crow	Plans to cover MMI in October issue. Circulation: 13 million.
<i>McCall's</i>	Sally Koslow	Plans to include major medical piece on breast cancer in October issue. Circulation: 4.3 million.
<i>Parenting</i>	Janet Chan	Plans to discuss breast self- exams in October issue. Circulation: 1.1 million.
<i>Parents</i>	Sarah Mahoney	Printed article on Breast Cancer and MMI. Circulation: 12 million.
<i>Redbook</i>	Kate White	Plans to include a feature article in September and an OB/GYN column in October on breast cancer. Circulation: 13 million.
<i>Self</i>	Rochelle Udell	Plans to include 16 pages on MMI. Vice-President involved Circulation: 1.16 million.
<i>Seventeen</i>	Meredith Berlin	Plans to print MMI article in October issue. Circulation: 2.4 million.

Vogue

Anna Wintour
Mary Murray

Plans to run an article on MMI in
September issue.
Circulation: 1.19 million

Women's Day

Stephanie Abarbanel

Printed an article on mammographies
a few months ago.
Circulation: 4.5 million.

SENIORS' PUBLICATIONS:

AARP Bulletin

Elliot Carlson

Plans to include article on the
Budget Reconciliation
Bill and what it means for
mammography coverage and
Medicare in the upcoming
issue.
Circulation: 23 million.

*Aging News
Alert*

Alan Cohen

Plans to include a small mention
about Medicare and
mammographies under the
larger heading of the budget.
Circulation: unavailable.

from Main E.
OPL

CC Melanne + Jen

3) Neil Offen of the Direct Selling Association notified us that of the 7.2 million independent contractors who sell their products, 75% of them use UPS and are unable to work without their deliveries. Also, National Small Business United informed us that their members are very concerned because the shipping needs of small businesses are essential to their companies ability to produce products and their packages are typically delivered last in situations like this.

WOMEN'S OUTREACH

- ✓ We met with NASA's newly established Women's Outreach Team (part of the Public Affairs Office) to find ways to collaborate on NASA's two year initiative launched in response to studies indicating that women are less favorable of the space program than men. The initiative's goal is to increase women's knowledge of how the space program improves their lives and the lives of their families. We discussed the possibility of co-sponsoring a briefing as a part of their initiative kick-off in January. The briefing would introduce women leaders to space based research and programs on women's health, medicine and nutrition; technology advancements in consumer, home, safety, and travel products; and services and understanding and preserving the health of the earth. Their work on digital mammography is something We can incorporate into our Breast Cancer Awareness Month.
- ✓ We held several meetings on the Substance Abuse and Mental Health Services Administration (SAMHSA's) National Conference on Women, "Cycles, Challenges, and Changes" to be held in late September in Phoenix. We are working with Administrator Nelba Chavez on the conference planning process, speaker recruitment, and helping to facilitate the participation of the First Lady and of Ms. Gore.
- ✓ We are working with The American Health Foundation on Annual Child Health Day (October 6) to draw attention to the status of children's health and address national and community based actions at a White House breakfast possibly hosted by the First Lady.

GAY/LESBIAN OUTREACH

Gay and lesbian health advocates hailed the creation of the first ever scientific panel funded by NIH and CDC to study issues relating to lesbian health issues. Budgeted at \$257,540, the panel is expected to shed light on the "uncharted territory" of lesbian health.

Twenty-one members of Congress have written to Secretary Gohen asking that DOD reconsider its dismissal of Lt. Col. Steve Loomis, whose "other than honorable" discharge for "conduct unbecoming an officer" came just one week before he would have qualified for full retirement, and denies him his pension and benefits. Loomis, a twenty year Vietnam veteran who volunteered for service and went on to win the Purple Heart and two Bronze Stars, was discharged after a firefighter, responding to an arson fire at Loomis' home, turned over to military authorities a sexually explicit videotape involving Loomis personally, found

PRESIDENT CLINTON'S HEALTH CARE PRIORITIES FOR WOMEN

- **Strengthens and Preserves Medicare.** The Medicare program primarily serves women, covering 22 million women, nearly 60 percent of all Medicare beneficiaries. It is especially important to older women. There are 13 million women on Medicare who are over the age of 75 and 2.8 million who are over the age of 85 (twice the number of men over 85). The President's budget preserves and improves the Medicare program. It extends the life of the Part A Hospital Insurance Trust Fund into 2007, gives beneficiaries more choices among private health plans, invests in new preventive health benefits.
- **Covers Annual Mammograms Screening for Medicare Beneficiaries.** In his balanced budget, President Clinton proposes to extend annual screening mammograms for Medicare beneficiaries over the age of 40. This proposal would make coverage consistent with the recommendations of most breast cancer experts.
- **Waives Cost-Sharing for Mammography Services.** The plan eliminates the copayment and deductible requirement for annual mammograms for beneficiaries over age 40, thereby increasing early detection and treatment of breast cancer. Although Medicare has covered screening mammography since 1991, only 14 percent of eligible beneficiaries without supplemental insurance receive mammograms.
- **Provides Alzheimer's Respite Benefit.** Since women make up two-thirds of informal caregivers for elderly in communities, they bear the financial and emotional strain of caring for people with Alzheimer's and other debilitating diseases. The President's budget takes the first step towards helping these families with a new Alzheimer's respite benefit to provide temporary help for families of Medicare beneficiaries with Alzheimer's and other dementia.
- **Prevents Women From Being Forced Out of the Hospital Only Hours After a Mastectomy.** In his State of the Union Address, President Clinton endorsed bipartisan legislation to ensure that women are not forced out of the hospital before they are ready because of pressure from their health plan. The Department of Health and Human Services also recently announced that it was sending a letter to all Medicare managed care plans making clear that they may not set ceilings for inpatient hospital treatment or set requirements for outpatient treatment, and that a woman and her doctor should make decisions about what is medically necessary.

- **Continues HHS Commitment to Breast Cancer Research, Prevention and Training.** Since the Clinton Administration has taken office, funding for breast cancer research, prevention and treatment has nearly doubled, from about \$276 million in FY 1993 to over \$500 million in the President's FY 1998 budget. This includes money for breast cancer screening as well as **the NIH-funded discovery of two breast cancer genes -- BRCA-1 and BCRA-2 -- which holds great promise for the development of new prevention strategies.**
- **Combats Violence Against Women.** Millions of women throughout our nation are plagued by the terror of family violence. Approximately 20 percent of all emergency room visits by women result from domestic violence. The President's FY 1998 budget proposes \$381 million to combat gender-based crime -- an \$123 million increase. This money funds grants to facilitate coordination among law enforcement officials, prosecutors, and victims assistance programs and to encourage mandatory arrest policies. Studies have shown that mandatory arrest policies often break the cycle of violence and reduce subsequent incidences of violence.
- **Funds Full Participation in Women, Infants, and Children (WIC).** WIC provides nutritional assistance, nutrition education and counseling, health and immunization referrals, and prenatal care to those who would otherwise not get it. WIC participation has grown by 25% over the last four years and will serve 7.5 million by 1998, fulfilling the President's goal of full participation.
- **Prevents and Treats AIDS Through the Ryan White CARE Act.** The incidence of AIDS has increased far more rapidly among women than men. For example, the incidence of AIDS among women in 1994 was 14.4 times that of 1985, while the incidence among men in 1994 was only 5.5 times that of 1985. The President's budget proposes just over \$1 billion for activities under the Ryan White CARE Act which funds grants to cities and States to help finance medical and support services for individuals with HIV; to community-based clinics for early HIV intervention services; to pediatric AIDS; and to HIV education and training programs. The budget also includes \$167 million dedicated to AIDS drug assistance programs to improve access to protease inhibitors and other life-extending AIDS medications.

CLINTON ADMINISTRATION INITIATIVES TO FIGHT BREAST CANCER

- **Introduced Legislation to Prevent Discrimination Based on Genetic Information.** The President has introduced bipartisan legislation to prohibit health plans from inappropriately using genetic screening information to deny coverage, set premiums, or to distribute confidential information. In many diseases, such as breast cancer, we are beginning to identify hidden genetic disorders which can spur early treatment. However, genetic testing also can be used by insurance companies and others to discriminate and stigmatize groups of people. In fact, studies show that a reason women do not get genetic testing for breast cancer is because they fear the information will be used to discriminate against them.
- **Took Action to Encourage Women to Follow National Cancer Institute's (NCI) Recommendations That Women Undergo Regular Mammogram Screening at Forty.** To bring Medicare, Medicaid, and federal employee health plans in line with the NCI's new recommendations, President Clinton is proposing that Medicare cover annual screening mammograms beginning at age forty and to eliminate coinsurance and deductibles for mammograms. The Health Care Financing Administration (HCFA) sent letters to every state Medicaid director encouraging them to cover annual mammogram screening beginning at age forty and make it clear that the federal government will provide federal matching payments for these services. President Clinton also directed the Office of Personnel Management to require all federal employee health benefit plans to cover annual mammograms beginning at age forty and he is encouraging all private plans to do the same.
- **Covers Annual Mammograms Screening for Medicare Beneficiaries.** In his balanced budget, President Clinton proposes to extend annual screening mammograms for Medicare beneficiaries over the age of 40. This proposal would make coverage consistent with the recommendations of most breast cancer experts.
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- **Builds on HHS Commitment to Breast Cancer Research, Prevention and Training.** Since the Clinton Administration has taken office, funding for breast cancer research, prevention and treatment has nearly doubled, from about \$276 million in FY 1993 to \$513 million in the President's FY 1998 budget.
- **Continues Department of Defense Funding for Breast Cancer Funding.** In FY 1997, the DOD will spend \$112 million on breast cancer research.
- **Increases funding for Gene Research.** HHS-funded research led to the discovery of two breast cancer genes -- BRCA-1 and BCRA-2 -- which holds great promise for the development of new prevention strategies. On October 26, 1996, President Clinton announced \$30 million in new funding for research into the genetic basis of breast cancer.
- **Educates Older Women to Use the Medicare Mammography Screening Benefit.** The First Lady launched a mammography campaign to inform and encourage older women to use the Medicare mammography screening benefit.
- **Improves Mammography Quality Standards.** In October 1994, the FDA implemented a program for mammography standards in the United States to ensure that they meet standards for equipment, personnel, record-keeping, and quality control. The standards also require that facilities be inspected annually. Women can look for the FDA certificate as evidence that the facility meets quality standards. Women can also find a certified mammography facility by calling 1-800-4-CANCER.
- **Screens for Low-Income Women.** CDC's National Breast Cervical Cancer Early Detection Program offers free or low-cost mammography screening to low-income elderly and minority women. On October 1, 1996, Secretary Shalala announced the expansion of the program to all fifty states. The goal is to reduce breast cancer deaths among these women by 30% and cervical cancer deaths by 900% through increased mammographies and pap testing.
- **Promotes Imaging Technology.** HHS is working with other federal agencies, including NASA, the Defense Department, and the CIA, as well as private companies to adapt high-tech imaging technology to improve the early detection of cancer in women. In 1996, HHS, in collaboration with the CIA, awarded \$1.98 million to the University of Pennsylvania to conduct a series of clinical trials of imaging technology from the intelligence community- intended originally for missile guidance and target recognition- to improve the early detection of breast cancer.

July 14, 1997

MEMORANDUM TO: PATTI SOLIS-DOYLE
FROM: BARBARA WOOLLEY
RE: SUGGESTED IDEA FOR SOUTH FLORIDA

Because of Mrs. Clinton, the Area Agency on Aging of Broward County bought their first Mammovan, a mobile service that provides mammography screenings at reduced prices to isolated elders in Broward County, Florida. Through this invaluable assistance, the lives of many senior women in this area have been saved through the early detection of breast cancer. As a result of the program's success, the Agency plans to buy a second Mammovan. For many years, the Area Agency on Aging of Broward County has been instrumental in the advancement of women's and seniors' health initiatives. Mrs. Clinton's leadership and advocacy of women's and seniors' health issues have profoundly inspired the Agency's efforts and been instrumental in bringing about its successes.

During October, Breast Cancer Awareness Month, the Mammovan will be celebrating its first anniversary. It is my understanding the Mrs. Clinton will be unable to be a part of this year's festivities; Mrs. Clinton was invited last year, as well, but was unable to attend. If Mrs. Clinton's schedule includes a trip to South Florida at any time in the future, the Area Agency on Aging would be honored by a short visit with her. The mobile nature of the Mammovan would enable representatives to meet with Mrs. Clinton in any location. Please keep this in mind. The Area Agency on Aging of Broward County would greatly appreciate it, and Mrs. Clinton would be able to witness the fruits of her labor.

Jennifer —
FLD —

Barbara

—

THE CONDE NAST PUBLICATIONS INC.

FAX COVER SHEET

TO: Jennifer Kelley

COMPANY: _____

FAX #: 202-456-2878

FROM: Andrea Kaplan, (212) 880-8286

DATE: 7/8# OF PAGES INCLUDING COVER: 2

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SELF

magazine

BETH FUCHS BRENNER
PUBLISHER

March 3, 1997

Ms. Mary Dickson
White House Office for Women's Initiatives & Outreach
708 Jackson Place
Washington, DC 20503

Dear Mary:

Thanks to you and Pat for spending time with Rochelle, Andrea, Judy, Sue and me yesterday, and for your enthusiasm for the proposed breast cancer awareness programs we put on the table.

As promised, I am following up with some detailed information on SELF's Pink Ribbon Award.

Three years after SELF's launch of the Pink Ribbon as the national symbol for breast cancer awareness, SELF initiated the Pink Ribbon Award in October 1994. Every October, the Pink Ribbon Award luncheon honors outstanding individuals and organizations for their shared dedication and commitment to the fight against breast cancer. We would be honored to present the 1997 Pink Ribbon Award to President Clinton, in memory of his mother, Virginia Kelley. The President's role both in initiating legislation and in propelling this cause to the forefront of his agenda is deserving of our acknowledgment, and his personal connection to the disease is well worth noting in a public forum.

Past honorees, all distinguished business leaders, include:

- 1994 Pink Ribbon Award recipient Evelyn H. Lauder, who was acknowledged for her partnership in initiating the Pink Ribbon and her tremendous work in developing the Evelyn H. Lauder Breast Center at the Memorial Sloan-Kettering Hospital. Dr. Larry Norton, Director of The Lauder Breast Center, also spoke at the luncheon.
- 1995 Pink Ribbon Award recipient Jerry Levin, then president and CEO of Revlon, who accepted the Award on behalf of all Revlon employees - and was honored for Revlon's establishment of the Revlon/UCLA Breast Center in Los Angeles. Dr. Susan Love, renowned breast cancer surgeon at UCLA and best-selling author of "The Breast Book", accompanied Mr. Levin to the podium.

- 1996 Pink Ribbon Award recipient James Preston, Chairman & CEO of Avon, who was honored for Avon's tremendously galvanizing Breast Cancer Awareness Crusade - developed to educate women about breast health and to improve access to early detection services. Since 1993, Avon has raised over \$18 million to fund numerous community-based programs across the U.S. and worldwide.
- In 1996, SELF also established the Pink Ribbon Award for New Initiatives and honored two additional individuals and their companies for impactful new breast cancer programs. The Lee Jeans "Blueprint" Initiative, established in Spring 1996, raised over \$3 million for the Susan B. Komen Foundation in its first year, primarily through National Denim Day, a nationwide event for breast cancer awareness that required companies to allow their employees to wear denim to work on October 25th in exchange for a \$5 donation, per employee, toward breast cancer research. SELF also presented the Pink Ribbon New Initiatives Award to Maidenform, whose sponsorship of an initiative called "Two Chicks, Two Bikes, One Cause" led young women on a cross-country cycling trek to raise awareness for breast cancer through educational forums, picnics and bike rides. The trek covered 4,400 miles through 17 states.
- Additionally in 1996, SELF honored ABC producer GERALYN LUCAS who, at 28, was diagnosed with breast cancer and has made it her mission to empower other women with cancer to take control of their treatment and their emotional recovery.

In just three years, the Pink Ribbon Awards luncheon has grown in size from 70 to over 200 attendees. The audience is composed of distinguished business leaders, health care professionals, breast cancer survivors and the press. As discussed, we are prepared to move the Awards luncheon to a larger ballroom to accommodate additional guests.

I'm sure we'll be in touch soon regarding the status of this Award, as well as our other proposals. Thanks again for all your time and I look forward to working together.

Sincerely yours,



cc: Pat Lewis - Director Of Specialty Press, The White House
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