# 117TH CONGRESS 1ST SESSION H.R. 1800

AUTHENTICATED U.S. GOVERNMENT INFORMATION

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To require a review of women and lung cancer, and for other purposes.

### IN THE HOUSE OF REPRESENTATIVES

March 11, 2021

Mr. BRENDAN F. BOYLE of Pennsylvania (for himself, Mr. FITZPATRICK, Ms. BONAMICI, and Mrs. DINGELL) introduced the following bill; which was referred to the Committee on Energy and Commerce

# A BILL

To require a review of women and lung cancer, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

## **3** SECTION 1. SHORT TITLE.

- 4 This Act may be cited as the "Women and Lung Can-
- 5 cer Research and Preventive Services Act of 2021".

#### 6 SEC. 2. FINDINGS.

- 7 Congress finds as follows:
- 8 (1) According to the American Cancer Society,
- 9 in the United States, approximately 171 women die

1	each day of lung cancer, or about one woman every
2	8.4 minutes.
3	(2) Lung cancer is the leading cause of cancer
4	death among women.
5	(3) The American Cancer Society estimates
6	that 62,470 women will die of lung cancer in 2021.
7	(4) Studies have shown a higher incidence rate
8	of lung cancer for women who were never smokers
9	compared to men who were never smokers.
10	(5) According to the American Cancer Society,
11	new cases of lung cancer dropped by 3 percent per
12	year in men from 2011 to 2015, while new cases in
13	women only dropped 1.5 percent per year in the
14	same time period.
15	(6) According to the 2014 report, "The Health
16	Consequences of Smoking—50 Years of Progress: A
17	Report of the Surgeon General, 2014", the relative
18	risk of developing lung cancer increased tenfold
19	among female smokers between 1959 and 2010.
20	(7) According to the American Cancer Society,
21	approximately 40 percent of lung cancers are adeno-
22	carcinoma, a subtype of non-small cell lung cancer,
23	which is the most common type of cancer seen in
24	non-smokers and is more common in women than in
25	men.

1	(8) According to the Environmental Protection
2	Agency, exposure to radon accounts for approxi-
3	mately 21,000 deaths from lung cancer each year
4	and is the leading cause of lung cancer in non-smok-
5	ers.
6	(9) A Government Accountability Office report
7	published on October 22, 2015, called for the Na-
8	tional Institutes of Health to do more in evaluating
9	gender differences in research.
10	(10) Additional research strategies, including
11	clinical trials, are necessary to explore the dif-
12	ferences in lung cancer risk factors, incidence, and
13	treatment response in women, and to address the
14	disparate impact of lung cancer on women who have
15	never smoked.
16	(11) Lung cancer screening, which can detect
17	lung cancer at its earliest, most curable stage, is a
18	covered service available without cost-sharing for
19	those at high risk.
20	(12) Published peer-reviewed actuarial studies
21	indicate that lung cancer screening individuals at
22	high risk may be cost-effective.
23	(13) The National Framework of Excellence in
24	Lung Cancer Screening and Continuum of Care,
25	launched in 2012, demonstrated that lung cancer

1	screening can be safely and effectively carried out in
2	community hospital settings around the Nation.
3	(14) Information on the impact of lung cancer
4	on women and the importance of early detection
5	should be incorporated into all relevant public health
6	awareness campaigns.
7	SEC. 3. SENSE OF CONGRESS CONCERNING WOMEN AND
8	LUNG CANCER.
9	It is the sense of Congress that—
10	(1) there is a disparate impact of lung cancer
11	on women and, in particular, on women who have
12	never smoked;
13	(2) additional research strategies to explore the
14	differences in women with respect to lung cancer
15	risk factors, incidence, histology, and response to
16	treatment are justified and necessary;
17	(3) the implementation of lung cancer preven-
18	tive services for women should be accelerated; and
19	(4) the public health agencies of the Federal
20	Government should coordinate public education and
21	awareness programs on the impact of lung cancer on
22	women and the importance of early detection.

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TIFY OPPORTUNITIES FOR THE ACCELERA-TION OF RESEARCH ON WOMEN AND LUNG CANCER, GREATER ACCESS TO PREVENTIVE SERVICES, AND STRATEGIC PUBLIC AWARE-

7 (a) IN GENERAL.—The Secretary of Health and
8 Human Services, in consultation with the Secretary of De9 fense and Secretary of Veterans Affairs, shall conduct an
10 interagency review to evaluate the status of, and identify
11 opportunities related to—

NESS AND EDUCATION CAMPAIGNS.

(1) research on women and lung cancer;
(2) access to lung cancer preventive services;

13 (2) access to lung cancer preventive services; 14 and

(3) strategic public awareness and educationcampaigns on lung cancer.

17 (b) CONTENT.—The review and recommendations18 under subsection (a) shall include—

(1) a review and comprehensive report on the
outcomes of previous research, the status of existing
research activities, and knowledge gaps related to
women and lung cancer in all agencies of the Federal Government;

24 (2) specific opportunities for collaborative,
25 interagency, multidisciplinary, and innovative re26 search, that would—

SEC. 4. INTERAGENCY REVIEW TO EVALUATE AND IDEN-

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1	(A) encourage innovative approaches to
2	eliminate knowledge gaps in research;
3	(B) evaluate environmental and genomic
4	factors that may be related to the etiology of
5	lung cancer in women; and
6	(C) foster advances in imaging technology
7	to improve risk assessment, diagnosis, treat-
8	ment, and the simultaneous application of other
9	preventive services;
10	(3) opportunities regarding the development of
11	a national lung cancer screening strategy with suffi-
12	cient infrastructure and personnel resources to ex-
13	pand access to such screening, particularly among
14	underserved populations; and
15	(4) opportunities regarding the development of
16	a national public education and awareness campaign
17	on women and lung cancer and the importance of
18	early detection of lung cancer.
19	(c) REPORT.—Not later than one year after the date
20	of the enactment of this Act, the Secretary of Health and
21	Human Services shall submit to Congress a report on the
22	review conducted under subsection (a).

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