- 1 SJR75
- 2 141438-1
- 3 By Senators Coleman, Irons, Figures, Allen, Beasley, Beason,
- Bedford, Blackwell, Brewbaker, Brooks, Bussman, Dial, Dunn,
- 5 Fielding, Glover, Holley, Holtzclaw, Keahey, Marsh, McGill,
- 6 Orr, Pittman, Reed, Ross, Sanders, Sanford, Scofield,
- 7 Singleton, Smith, Smitherman, Taylor, Waggoner, Ward, Whatley,
- 8 and Williams
- 9 RFD:
- 10 First Read: 26-APR-12

1	141438-1:n:04/19/2012:JMW/jmw LRS2012-2649
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8	RECOGNIZING THE WOMEN'S HEART HEALTH INITIATIVE, "A
9	CALL TO ACTION."
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11	WHEREAS, heart disease, often called the "silent
12	killer," continues to be the number one killer of women,
13	causing a woman to die from heart disease every 60 seconds;
14	and
15	WHEREAS, heart disease claims more women's lives
16	than the next eight causes of death combined, including breast
17	cancer; and
18	WHEREAS, two-thirds of American women who die
19	suddenly from heart disease had no prior symptoms; and
20	WHEREAS, African-American women and Latina women
21	have higher heart disease and stroke risk factors than
22	Caucasian women of comparable socioeconomic status, with heart
23	disease being the number one killer of African-American women;
24	and
25	WHEREAS, increasing the number of women of different
26	races and various age groups in cardiovascular clinical trials

is pivotal to identifying the best treatment options for heart disease and stroke in all women; and

WHEREAS, programs such as "Go Red for Women," led by the American Heart Association, and WISEWOMAN, created by the Centers for Disease Control, are designed to improve prevention through early diagnosis connected with the ability to access the best treatment, and continuation of such programs is vital to addressing women's heart health; and

WHEREAS, the Women's Heart Health Initiative explores a nontraditional venue to provide additional cardiovascular screening for women during their obstetrician/gynecologist office visits, which can be of further assistance to health care providers in early identification, education, and the prevention of heart disease; now therefore,

BE IT RESOLVED BY THE LEGISLATURE OF ALABAMA, BOTH HOUSES THEREOF CONCURRING, That we hereby recognize there is a monumental need for "A Call to Action," to devise strategies, with a strong emphasis on recognizing the warning signs of a cardiovascular event, encompassing socioeconomic factors, cultural barriers, and lifestyle choices for those women at highest risk, thereby decreasing the deaths of one in three women from heart disease and stroke each year.

BE IT FURTHER RESOLVED, That we encourage public policy to be implemented and monitored to establish and collaborate with private partners to raise awareness and promote education of heart disease, to increase screening

programs that will identify risk factors in women to aid in

the early detection and prevention of heart disease, to ensure

access to medical treatment protocols for heart disease, and

to provide suggestions and support for lifestyle choices that

contribute to the management of heart disease for those women

at highest risk, in order to improve the quality of life for

all women.

BE IT FURTHER RESOLVED, That a copy of this resolution be provided to the Alabama Department of Public Health.

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