



REPUBLIC OF THE PHILIPPINES
HOUSE OF REPRESENTATIVES
Quezon City, Manila
FIFTEENTH CONGRESS
FIRST REGULAR SESSION

COMMITTEE REPORT NO. 881

Submitted by the Committee on Health on 14 APR 2011

Re : House Bill No. 4541
Recommending its approval in substitution of House Bill Nos. 2984 and 3285

Sponsors : Reps. Alfredo D. Marañon III, Joseph Victor G. Ejercito, Rufus B. Rodriguez and Maximo B. Rodriguez, Jr.

Mr. Speaker:

The Committee on Health to which were referred House Bill No. 2984 introduced by Rep. Joseph Victor G. Ejercito, entitled:

AN ACT PROVIDING THE PUBLIC WITH ADEQUATE NOTICE AND EDUCATION ON THE EFFECTS OF EXPOSURE TO MERCURY THROUGH THE DEVELOPMENT OF HEALTH ADVISORIES AND BY REQUIRING THAT SUCH APPROPRIATE ADVISORIES BE POSTED, OR MADE READILY AVAILABLE. AT ALL BUSINESSES THAT SELL FRESH, FROZEN, AND CANNED FISH AND SEAFOOD WHERE THE POTENTIAL FOR MERCURY EXPOSURE EXISTS; and

House Bill No. 3285, introduced by Reps. Rufus B. Rodriguez and Maximo B. Rodriguez, Jr., entitled:

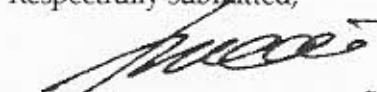
AN ACT PROVIDING THE PUBLIC WITH ADEQUATE NOTICE AND EDUCATION ON THE EFFECTS OF EXPOSURE TO MERCURY THROUGH THE DEVELOPMENT OF HEALTH ADVISORIES AND BY REQUIRING THAT SUCH APPROPRIATE ADVISORIES BE POSTED, OR MADE READILY AVAILABLE. AT ALL BUSINESSES THAT SELL FRESH, FROZEN, AND CANNED FISH AND SEAFOOD WHERE THE POTENTIAL FOR MERCURY EXPOSURE EXISTS

has considered the same and recommends that the attached House Bill No. 4541, entitled:

AN ACT ESTABLISHING MERCURY EXPOSURE INFORMATION PROGRAM AND FOR OTHER PURPOSES

be approved in substitution of House Bill Nos. 2984, and 3285 with Reps. Joseph Victor G. Ejercito, Rufus B. Rodriguez, Maximo B. Rodriguez, Jr. and Alfredo D. Marañon III as authors thereof.

Respectfully submitted,


HON. ALFREDO D. MARAÑON III
Chairman
Committee on Health

THE HONORABLE SPEAKER
House of Representatives
Quezon City

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

FIFTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 4541

(In substitution of House Bill Nos. 2984 and 3285)

Introduced by Reps. Joseph Victor G. Ejercito, Rufus B. Rodriguez, Maximo Rodriguez Jr. and Alfredo D. Marañon III

AN ACT

**ESTABLISHING MERCURY EXPOSURE INFORMATION PROGRAM
AND FOR OTHER PURPOSES**

Be it enacted by the Senate and House of Representatives in Congress of the Philippines assembled:

1 SECTION 1. *Short Title.* – This Act shall be known as the “*Mercury*
2 *Exposure Information Act of 2011*”.

3 SEC. 2. *Declaration of Policy.* - Pursuant to the 1987 Constitution, the State
4 hereby declares the policy of protecting and promoting the right to health of the
5 people and instilling health consciousness among them. Towards this end, the State
6 shall adopt an integrated and comprehensive approach to health development,
7 which shall endeavor to make essential goods, health and other social services
8 available to every Filipino at affordable cost.

9 SEC. 3. *Mercury Exposure Information Program.* – The Secretary of
0 Health shall, in consultation with other government agencies and non-profit private
1 entities, including cooperative health extension services, design and implement a

Mercury Exposure Information Program to ensure that the public is informed of the hazards and adverse effects of mercury exposure through the consumption of fish and other seafood.

Under this program, the Secretary of Health shall issue a comprehensive health advisory to the general public about the presence of methyl mercury in fish and other seafood and its potential dangers to health, particularly, to the sensitive population or high risk group such as pregnant women and children.

The Secretary of Health shall provide:

- a) Medical information on the signs and symptoms, treatment and prevention of mercury related illnesses; and
- b) Reliable information on the mercury levels in fish and other seafood, the safe dose and consumption limits with emphasis on limiting the consumption of fish and other seafood with unsafe or high levels of mercury.

The health advisory shall be clear, concise and printed in English, Filipino or any dialect that the Secretary of Health may deem appropriate to effectively disseminate the information.

The health advisory shall be posted in the following areas:

- a) In the patient and client areas of all maternal and child health hospitals, clinics, centers, and similar offices; and
- b) In markets and business establishments where fish and other seafood are sold for human consumption.

The Secretary of Health shall periodically update the health advisory.

SEC. 4. *Mercury Warning Consumer's Guide.* – A mercury warning consumer's guide or manual on the potential dangers of exposure to mercury shall be prepared and distributed by the Department of Health in coordination with the Department of Environment and Natural Resources, to the following:

- 1 a) Appropriate fisheries, wildlife and environmental law enforcement
2 agencies;
- 3 b) All applicants for fishing license at the time the license is issued; and
4 c) The public upon request.

5 SEC. 5. *Sampling and Monitoring.* – The Secretary of Health shall ensure
6 that seafood methyl-mercury sampling and monitoring program are conducted by
7 the Food and Drug Administration to assist in the documentation of mercury levels
8 in various fish species. The sampling program shall be conducted to provide
9 statistically valid monitoring data with respect to mercury levels in fish and other
10 seafood, including market-basket studies, and the extent to which fish and other
11 seafood with mercury levels in excess of the acceptable level are sold in
12 commerce. Such information, along with information gathered by the Department
13 of Environment and Natural Resources, shall be compiled into an annual report to
14 track changes in dietary exposure to mercury from fish and other seafood.

15 SEC. 6. *Penalties.* – A fine of not less than Five Thousand Pesos
16 (₱5,000.00) but not more than Ten Thousand Pesos (₱10,000.00) shall be imposed
17 upon the head or official of any maternal and child hospital, clinic, center, or
18 similar office who fails to post the consumer advisory on the hazards of mercury
19 pursuant to Section 2 of this Act.

20 A fine of not less than Four Thousand Pesos (₱4,000.00) but not more than
21 Eight Thousand Pesos (₱8,000.00) shall be imposed upon the administrator or
22 operator of any market or business establishment that sells fish and other seafood
23 who fails to post the consumer advisory on the hazards of mercury pursuant to
24 Section 2 of this Act.

25 SEC. 6. *Implementing Rules and Regulation.* - Within sixty (60) days
26 after the effectivity of this Act, the Secretary of Health shall promulgate the
27 necessary rules and regulations for the effective implementation of this Act.

1 SEC. 7. *Repealing Clause.* – Any law, presidential decree or issuance,
2 executive order, letter of instruction, administrative order, rule or regulation
3 contrary to or inconsistent with the provisions of this Act is hereby repealed,
4 modified or amended accordingly.

5 SEC. 8. *Effectivity Clause.* – This Act shall take effect fifteen (15) days
6 after its publication in any national newspaper of general circulation.

Approved,

FACT SHEET

House Bill Nos. 2984 and 3285

(As Approved by the Committee on Health on December 14, 2010)

AN ACT ESTABLISHING MERCURY EXPOSURE INFORMATION PROGRAM AND FOR OTHER PURPOSES

Introduced by: **REPS. JOSEPH VICTOR G. EJERCITO, RUFUS B. RODRIGUEZ, MAXIMO B. RODRIGUEZ, JR. AND ALFREDO D. MARAÑON III**

Committee Referral: **COMMITTEE ON HEALTH (Primary)**

Committee Chairperson: **HON. ALFREDO D. MARAÑON III**

OBJECTIVE:

- To inform the public of the hazards and adverse effects of mercury exposure through the consumption of fish and other seafood.

KEY PROVISIONS:

- Mandates the Secretary of Health and other concerned agencies to implement a Mercury Exposure Information Program
- Authorizes the Secretary of Health to issue a comprehensive health advisory to the general public about the presence of methyl mercury in fish and other seafood and its potential dangers to health, particularly to the high risk group such as pregnant women and children
- Directs the Department of Health to provide medical information on the signs and symptoms, treatment and prevention of mercury related illnesses and reliable information on the mercury level in fish and other seafood
- Obligates the market and business establishments where fish and other seafood are sold for human consumption to post health advisories
- Requires the DOH and the Department of Environment and Natural Resources (DENR) to distribute a warning consumer's guide or manual on the potential dangers of exposure to mercury
- Mandates the DOH to ensure that seafood methyl-mercury sampling and monitoring programs are conducted by the Food and Drug Administration to assist in the documentation of mercury levels in various fish species
- Penalizes any violation of this Act

RELATED LAW

None

HOUSE OF REPRESENTATIVES
REFERENCE AND RESEARCH BUREAU
OFFICE OF THE EXECUTIVE DIRECTOR
RECEIVED BY: Morgan
DATE: 24 JAN 2011

January 24, 2011

ATTY. ROSARIO H. AMATONG-BUENDIA
Executive Director
Reference and Research Bureau

Attention: **Atty. Jose Noel A. Garong**
Service Director
Bill Drafting Service

Dear Sir/Madam;

This is in reference to House Bill Nos. 2984 entitled, "AN ACT PROVIDING THE PUBLIC WITH ADEQUATE NOTICE AND EDUCATION ON THE EFFECTS OF EXPOSURE TO MERCURY THROUGH THE DEVELOPMENT OF HEALTH ADVISORIES AND BY REQUIRING THAT SUCH APPROPRIATE ADVISORIES BE POSTED, OR MADE READILY AVAILABLE, AT ALL BUSINESSES THAT SELL FRESH, FROZEN, AND CANNED FISH AND SEAFOOD WHERE THE POTENTIAL FOR MERCURY EXPOSURE EXISTS" introduced by Reps. Joseph Victor G. Ejercito, which was subsequently approved by the Committee on Health.

The Committee is now in the process of preparing the committee report on the same. However, after careful review, the Committee believes that the formatting of the bill needs much improvement.

In this regard, may we seek your assistance in the proper style/reformatting of the attached house bill for better understanding and appreciation.

The undersigned would appreciate it very much if you could give your comment on or before January 25, 2011.

Very truly yours,

For the Chairman:

ALFREDO D. MARAÑÓN III
Chairman
Committee on Health


Ma. Lourdes M. Sanchez
Acting Committee Secretary

Morgan
02-17-2011

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Batasang Pambansa, Quezon City

FIFTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 2984



INTRODUCED BY REP. JOSEPH VICTOR G. EJERCITO

EXPLANATORY NOTE

Mercury is a persistent, bioaccumulative heavy metal that poses a significant risk to human health, wildlife, and the environment.

Unfortunately, mercury discharges into the atmosphere and surface oceans have increased two-to-five fold since the beginning of the industrialized period due to human activities. Substantial evidence is accumulating that exposure to methyl-mercury is widespread in the general public and occurring at higher than health-based levels of concern according to the World Health Organization. Fish and seafood caught or sold in the Philippines are contaminated with methyl-mercury a toxic element that may cause neurological damage and other health related problems as a result of fish or seafood consumption.

Evidence is continuing to emerge linking increased risk of coronary heart disease to mercury exposure, as presented in at least 2 peer reviewed studies.

Sadly, health advisory information on mercury-contaminated fish, which is necessary to protect public health, is not widely known by the government. This lack of awareness potentially threatens tens of millions of Filipinos who may unknowingly ingest harmful amounts of mercury because they are not aware of exposure risks from consumption of freshwater fish and seafood.

The proposed measure is filed to address this problem by providing the public with adequate notice and education on the effects of exposure to mercury, through the development of health advisories and by requiring that such appropriate advisories be posted, or made readily available, at all businesses that sell fresh, frozen, and canned fish and seafood where the potential for mercury exposure exists.

Hence, immediate passage of this bill is earnestly sought.

A handwritten signature in black ink, appearing to be 'JOSEPH VICTOR G. EJERCITO'.

JOSEPH VICTOR G. EJERCITO
Representative

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Batasang Pambansa, Quezon City

FIFTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 2984

INTRODUCED BY REP. JOSEPH VICTOR G. EJERCITO

AN ACT

PROVIDING THE PUBLIC WITH ADEQUATE NOTICE AND EDUCATION ON THE EFFECTS OF EXPOSURE TO MERCURY THROUGH THE DEVELOPMENT OF HEALTH ADVISORIES AND BY REQUIRING THAT SUCH APPROPRIATE ADVISORIES BE POSTED, OR MADE READILY AVAILABLE, AT ALL BUSINESSES THAT SELL FRESH, FROZEN, AND CANNED FISH AND SEAFOOD WHERE THE POTENTIAL FOR MERCURY EXPOSURE EXISTS

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

SECTION 1. Short Title. - This Act shall be known as the "*Mercury Health Advisory Act.*"

SEC. 2. Purposes - The purposes of this Act are to-

1. ensure that the public is adequately informed about the potential adverse effects of mercury exposure through the consumption of fish products;
2. require the Secretary of Health to work cooperatively with other government agencies, as well as nonprofit organizations, to create appropriate advisories for the distribution to the public of explanations of the potential adverse effects of mercury exposure from fish consumption;
3. require the Bureau of Food and Drug Administration to resume its seafood methyl mercury monitoring program to better document mercury levels in various fish species sold in commerce;
4. require the Secretary of Health, in cooperation with private and public organizations, to design and implement a National Public Education Program regarding the presence of methyl-mercury in seafood and fish consumption advisories for methyl-mercury; and
5. require the Secretary of Environment and Natural Resources to annually prepare a report on the impacts of mercury on human health and the environment.

SEC. 3. *Advisory Notices* -

1. Consumer Mercury Advisory Notice-

(1) In general- The Department of Environment and Natural Resources, in coordination with the Department of Health, shall jointly develop fish consumption advisories for methyl-mercury in fish. Such advisories shall be based on appropriate Reference Dose for -

- (A) the general population;
- (B) sensitive populations; and
- (C) populations consuming above average amounts of fish.

(2) Consumer's Notice- The Secretary of Health shall prepare a consumer's mercury advisory notice. Such notice shall be distributed widely by the Secretary, at no cost, to health professionals, particularly medical offices that provide gynecological, obstetrical, or pediatric care, and to the extent practicable shall be made available and posted in the patient or client areas of all maternal and child health and nutrition program offices, and shall be made available to health care providers, government agencies, and the general public upon request.

(3) Criteria- The advisories developed under this subsection shall-

(A) explain, in an easily understandable manner, the dangers of mercury exposure through the consumption of mercury contaminated fish to women of childbearing age, women who expect to become pregnant, women who are pregnant or breast feeding their children, and young children and their parents;

(B) describe, in an easily understandable manner, in detail the most current mercury health advisories prepared by the National Government concerning fish consumption, contain the toll free number established under paragraph (4), and contain such other information as the Secretary determines appropriate; and

(C) be printed in large type in English and Filipino or any dialect determined by the Secretary to be culturally and linguistically appropriate.

2. Mercury Warning Consumer's Guide-

(1) In general- The Secretary of Health shall prepare a consumer's guide to mercury and health advisory for the consumption of recreationally-caught fish. Such guide shall be distributed, at no cost, to--

(A) appropriate fisheries, wildlife, and environmental law enforcement agencies;

(B) all applicants for a fishing license at the time the license is issued; and

(C) to public upon request.

(2) Criteria- The guide developed under paragraph (1) shall-

(A) be printed in large type in English and Filipino or any dialect determined by the Secretary to be culturally and linguistically appropriate;

3. Consumption Advisory-

(1) In general- The Secretary of Health, in consultation with the Secretary of Agriculture and other appropriate government entities to--

(A) develop and distribute regional and national advisories concerning the presence of methyl-mercury in seafood;

(B) develop standardized formats for written and broadcast advisories regarding methyl-mercury in seafood;

(C) develop and periodically upgrade information related to mercury fish tissue test results and fish consumption advisories for methyl-mercury;

(D) coordinate local advisories in the formation of the National Public Education Program under subsection (4)(1); and

(E) coordinate with that sector of the retail food industry that is engaged in the sale of any fresh, packaged, or frozen fish or seafood products intended for human consumption, concerning the posting of such advisories in their place of business where fish are sold to inform women of childbearing age, pregnant, and nursing women and the parents of young children on the potential dangers of mercury that is present in certain fish or seafood.

(2) Criteria- The advisories and notices developed under paragraph (1) shall include information both on limiting the consumption of certain high level fish and seafood to the general population and, for sensitive populations such as women of childbearing age and children, stress the importance of limiting consumption of frequently consumed fish that may exceed the Reference Dose.

4. Public Education and Advisory System-

(1) Public education- The Secretary of Health, in consultation with public and nonprofit private entities (including cooperative extension services and appropriate government entities), shall design and implement a national public education program regarding the presence of methyl-mercury in seafood.

(2) Features- The program developed under paragraph (1) shall provide-

(A) information to the public regarding-

(i) standards and good practice requirements relating to methylmercury in seafood, and

(ii) the promotion of public awareness, understanding, and acceptance of such standards and requirements;

(B) information to health professionals so that health professionals may improve the diagnosis and treatment of mercury-related illness and advise individuals whose health conditions place those individuals at particular risk; and

(C) such other information or advice to consumers and other individuals as the Secretary determines will promote the purposes of this section.

5. Sampling and Monitoring

(1) In general- The Secretary of Health shall ensure the seafood methylmercury monitoring sampling program of the Bureau of Food and Drug Administration to assist in documenting mercury levels in various fish species.

(2) Monitoring- The sampling program described in paragraph (1) shall be conducted so as to provide statistically valid monitoring data with respect to mercury levels in fish and seafood (including market-basket studies) including documenting the extent to which fish with mercury levels in excess of the action level are sold in commerce. Such information, along with information gathered by the Department of Environment and Natural Resources, shall be compiled into an annual report by the Secretary to track changes in dietary exposure to mercury from fish and seafood.

(3) Avoidance of duplication of effort- To the extent practicable, the sampling program described in paragraph (1) shall be consistent with, and shall be coordinated with, other seafood sampling programs that are in use, so as to avoid duplication of effort.

SEC. 4. Repealing Clause. - Any law, presidential decree or issuance, executive order, letter of instruction, administrative order, rule or regulation contrary to or inconsistent with the provisions of this Act is hereby repealed, modified or amended accordingly.

SEC. 5. Separability Clause. - If any provision or part hereof, is held invalid or unconstitutional, the remainder of the law or the provisions not otherwise affected shall remain valid and subsisting.

SEC. 6. Effectivity Clause. - This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved,

FIFTEENTH CONGRESS)
REPUBLIC OF THE PHILIPPINES)
FIRST REGULAR SESSION)

HOUSE OF REPRESENTATIVES

Introduced by Representative Rufus B. Rodriguez and
Representative Maximo B. Rodriguez, Jr.

House Bill No. 3285

EXPLANATORY NOTE

Mercury is a persistent, bio-accumulative heavy metal that poses a significant risk to human health, wildlife, and the environment.

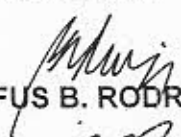
Unfortunately, mercury discharges into the atmosphere and surface oceans have increased two-to-five fold since the beginning of the industrialized period due to human activities. Substantial evidence is accumulating that exposure to methyl-mercury is widespread in the general public and occurring at higher than health-based levels of concern according to the World Health Organization. Fish and seafood caught or sold in the Philippines are contaminated with methyl-mercury a toxic element that may cause neurological damage and other health related problems as a result of fish or seafood consumption.

Evidence is continuing to emerge linking increased risk of coronary heart disease to mercury exposure, as presented in at least 2 peer reviewed studies.

Sadly, health advisory information on mercury-contaminated fish, which is necessary to protect public health, is not widely known to the government. This lack of awareness potentially threatens tens of millions of Filipinos who may unknowingly ingest harmful amounts of mercury because they are not aware of exposure risks from consumption of freshwater fish and seafood.

The proposed measure is filed to address this problem by providing the public with adequate notice and education on the effects of exposure to mercury, through the development of health advisories and by requiring that such appropriate advisories be posted, or made readily available, at all businesses that sell fresh, frozen, and canned fish and seafood where the potential for mercury exposure exists.

Hence, immediate passage of this bill is earnestly sought.


RUFUS B. RODRIGUEZ


MAXIMO B. RODRIGUEZ, JR.

FIFTEENTH CONGRESS)
REPUBLIC OF THE PHILIPPINES)
FIRST REGULAR SESSION)

HOUSE OF REPRESENTATIVES

Introduced by Representative Rufus B. Rodriguez and
Representative Maximo B. Rodriguez, Jr.

House Bill No. 3285

AN ACT

PROVIDING THE PUBLIC WITH ADEQUATE NOTICE AND EDUCATION ON THE EFFECTS OF EXPOSURE TO MERCURY THROUGH THE DEVELOPMENT OF HEALTH ADVISORIES AND BY REQUIRING THAT SUCH APPROPRIATE ADVISORIES BE POSTED, OR MADE READILY AVAILABLE, AT ALL BUSINESSES THAT SELL FRESH, FROZEN, AND CANNED FISH AND SEAFOOD WHERE THE POTENTIAL FOR MERCURY EXPOSURE EXISTS

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

SECTION 1. Short Title. - This Act shall be known as the "*Mercury Health Advisory Act.*"

SEC 2. Purposes - The purposes of this Act are to--

1. ensure that the public is adequately informed about the potential adverse effects of mercury exposure through the consumption of fish products;
2. require the Secretary of Health to work cooperatively with other government agencies, as well as nonprofit organizations, to create appropriate advisories for the distribution to the public of explanations of the potential adverse effects of mercury exposure from fish consumption;
3. require the Bureau of Food and Drug Administration to resume its seafood methyl mercury monitoring program to better document mercury levels in various fish species sold in commerce;
4. require the Secretary of Health, in cooperation with private and public organizations, to design and implement a National Public Education Program regarding the presence of methyl-mercury in seafood and fish consumption advisories for methyl-mercury; and
5. require the Secretary of Environment and Natural Resources to annually prepare a report on the impacts of mercury on human health and the environment.

SEC 3. Advisory Notices -

1. Consumer Mercury Advisory Notice-

(1) In general - The Department of Environment and Natural Resources, in coordination with the Department of Health, shall jointly develop fish consumption advisories for methyl-mercury in fish. Such advisories shall be based on appropriate Reference Dose for --

- (A) the general population;
- (B) sensitive populations; and
- (C) populations consuming above average amounts of fish.

(2) Consumer's Notice - The Secretary of Health shall prepare a consumer's mercury advisory notice. Such notice shall be distributed widely by the Secretary, at no cost, to health professionals, particularly medical offices that provide gynecological, obstetrical, or pediatric care, and to the extent practicable shall be made available and posted in the patient or client areas of all maternal and child health and nutrition program offices, and shall be made available to health care providers, government agencies, and the general public upon request.

(3) Criteria - The advisories developed under this subsection shall -

(A) explain, in an easily understandable manner, the dangers of mercury exposure through the consumption of mercury contaminated fish to women of childbearing age, women who expect to become pregnant, women who are pregnant or breast feeding their children, and young children and their parents;

(B) describe, in an easily understandable manner, in detail the most current mercury health advisories prepared by the National Government concerning fish consumption, contain the toll free number established under paragraph (4), and contain such other information as the Secretary determines appropriate; and

(C) be printed in large type in English and Filipino or any dialect determined by the Secretary to be culturally and linguistically appropriate.

2. Mercury Warning Consumer's Guide -

(1) In general - The Secretary of Health shall prepare a consumer's guide to mercury and health advisory for the consumption of recreationally-caught fish.

Such guide shall be distributed, at no cost, to -

(A) appropriate fisheries, wildlife, and environmental law enforcement agencies;

(B) all applicants for a fishing license at the time the license is issued; and

(C) to public upon request.

(2) Criteria - The guide developed under paragraph (1) shall -

(A) be printed in large type in English and Filipino or any dialect determined by the Secretary to be culturally and linguistically appropriate;

3. Consumption Advisory-

(1) In general - The Secretary of Health, in consultation with the Secretary of Agriculture and other appropriate government entities shall --

(A) develop and distribute regional and national advisories concerning the presence of methyl-mercury in seafood;

(B) develop standardized formats for written and broadcast advisories regarding methyl-mercury in seafood;

(C) develop and periodically upgrade information related to mercury fish tissue test results and fish consumption advisories for methyl-mercury;

(D) coordinate local advisories in the formation of the National Public Education Program under subsection (4)(1); and

(E) coordinate with that sector of the retail food industry that is engaged in the sale of any fresh, packaged, or frozen fish or seafood products intended for human consumption, concerning the posting of such advisories in their place of business where fish are sold to inform women of childbearing age, pregnant, and nursing women and the parents of young children on the potential dangers of mercury that is present in certain fish or seafood.

(2) Criteria - The advisories and notices developed under paragraph (1) shall include information both on limiting the consumption of certain high level fish and seafood to the general population and, for sensitive populations such as women of childbearing age and children, stress the importance of limiting consumption of frequently consumed fish that may exceed the Reference Dose.

4. Public Education and Advisory System-

(1) Public education- The Secretary of Health, in consultation with public and nonprofit private entities (including cooperative extension services and appropriate government entities), shall design and implement a national public education program regarding the presence of methyl-mercury in seafood.

(2) Features- The program developed under paragraph (1) shall provide-

(A) information to the public regarding-

(i) standards and good practice requirements relating to methyl-mercury in seafood; and

(ii) the promotion of public awareness, understanding, and acceptance of such standards and requirements;

(B) information to health professionals so that health professionals may improve the diagnosis and treatment of mercury-related illness and advise individuals whose health conditions place those individuals at particular risk; and

(C) such other information or advice to consumers and other individuals as the Secretary determines will promote the purposes of this section.

5. Sampling and Monitoring

(1) In general- The Secretary of Health shall ensure the seafood methyl-mercury monitoring sampling program of the Bureau of Food and Drug Administration to assist in documenting mercury levels in various fish species.

(2) Monitoring- The sampling program described in paragraph (1) shall be conducted so as to provide statistically valid monitoring data with respect to mercury levels in fish and seafood (including market-basket studies) including documenting the extent to which fish with mercury levels in excess of the action level are sold in commerce. Such information, along with information gathered by the Department of Environment and Natural Resources, shall be compiled into an annual report by the Secretary to track changes in dietary exposure to mercury from fish and seafood.

(3) Avoidance of duplication of effort- To the extent practicable, the sampling program described in paragraph (1) shall be consistent with, and shall be coordinated with, other seafood sampling programs that are in use, so as to avoid duplication of effort.

SEC 4. Repealing Clause. - Any law, presidential decree or issuance, executive order, letter of instruction, administrative order, rule or regulation contrary to or inconsistent with the provisions of this Act is hereby repealed, modified or amended accordingly.

SEC 5. Separability Clause. - If any provision or part hereof, is held invalid or unconstitutional, the remainder of the law or the provisions not otherwise affected shall remain valid and subsisting.

SEC 6. Effectivity Clause. - This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved.



Republic of the Philippines
HOUSE OF REPRESENTATIVES
COMMITTEE ON HEALTH
Quezon City, Metro Manila

MINUTES OF MEETING OF THE COMMITTEE ON HEALTH HELD ON DECEMBER 14, 2010 AT 9:00 A.M, CONFERENCE ROOMS 14 AND 15 AT THE RAMON V. MITRA BLDG, HOUSE OF REPRESENTATIVES, BATASAN, QUEZON CITY.

GUESTS/RESOURCE PERSONS IN ATTENDANCE:

1. Dr. Juanito D. Taleon Regional Director for Region IV-A, Department of Health
2. Dr. Anthony P. Calibo National Center for Disease Prevention and Control, DOH
3. Dr. Ernie Vera Medical Officer VII, Degenerative Office, DOH
4. Atty. Anabelle de Veyra Center for Health Development Region 8, DOH
5. Dr. Irma L. Asuncion OIC Regional Director, DOH
6. Dr. Juliana M Reyes DOH
7. Engr. Ana Trinidad Rivera DOH
8. Dr. Isauro N. Garcia Acting City Health Officer, City Health Department, Malabon City
9. Engr. Benjamin N. Villacorta City Administrator, City Health Department, Malabon City
10. Dr. Venancio Banzon Medical Director, Jose B. Lingad Hospital
11. Ms. Flordelina R. Ilagan Representative, Jose B. Lingad General Hospital
12. Dr. Romeo Y. Enriquez Secretary, Philippine Psychiatric Association
13. Dr. Santiago A. del Rosario Commissioner, Philippine Medical Association
14. Dr. Jaime C. Balingit Vice President, Philippine Urological Association
15. Mr. Alex D. Asuncion Representative, Philippine Cancer Society
16. Dr. Hilarion Henares Jr. President, HEAL Philippines Foundation
17. Ms. Nona O. Andaya-Castillo Representative, Nurturers of Earth, Inc.
18. Dr. Elvira Henares-Esguerra Representative, Children for Breastfeeding, Inc.
19. Ms. Corazon Del Mundo Chairperson, Women Involved in Nation Building
20. Joel Maleon Representative, Department of Environment and Natural Resources
21. Mr. Alex Castro III Executive Director, Infant and Pediatrics Nutrition Association of the Philippines (IPNAP)
22. Dr. Lourdes L. Ignacio Representative, World Association for Psychological Rehabilitation

I. CALL TO ORDER/ ROLL CALL

Rep. Alfredo D. Marañon III, Chairperson of the Committee on Health, called the meeting to order at 9:26 a.m. Upon motion, duly seconded and there being no objections, the calling of the roll was dispensed with.

~~II. APPROVAL OF MINUTES OF THE PREVIOUS MEETING~~

Upon motion of Rep. Eriguel, duly seconded and there being no objections, the reading of the minutes of November 10, 2010 meeting was dispensed with.

III. PRELIMINARY REMARKS OF THE CHAIRMAN

In keeping with the holiday atmosphere, the Chair extended the season's greetings to everyone. He then acknowledged the Members and authors present and welcomed the invited guests and resource persons. He informed the Body that most of the national bills calendared for deliberation had been approved on 3rd Reading in the previous Congress.

IV. INITIAL DELIBERATION ON THE FOLLOWING LOCAL MEASURES:

House Bill No. 1999, entitled, An Act Establishing a Thirty (30)-Bed Hospital in the Second District of Antipolo City, to be known as the Antipolo 2nd District Hospital, and Appropriating Funds Therefor, authored by Rep. Romeo Acop

Having been recognized by the Chair, Rep. Acop, author of HB No. 1999, expounded on his measure by stating the need to establish a new hospital in the 2nd District of Antipolo. He informed the Body that Antipolo has two (2) existing private hospitals in the area. However, indigent patients of his district cannot afford to avail of the health services provided by these private hospitals. Citing a constitutional provision on the right of the people to health, he urged the Members to support the passage of his bill.

In response, Dr. Juanito D. Taleon, Regional Director for Region IV-A (CALABARZON), acknowledged the noble intent of the author. However, he cited the Department of Health's (DOH) current policy that discourages the establishment of new hospitals when there are already existing hospitals in the area. Instead of the establishment of a new hospital, he suggested strengthening the existing health facilities and health centers in Antipolo.

Rep. Acop questioned the DOH policy as contrary to the mandate of the Constitution. He expressed the common sentiments of his constituents in the remote areas who complained that their relatives and loved ones are dying without even the services of a doctor. He said that there are barangays in Antipolo which have no "botika" at all and are about 40 minutes away from the nearest clinic.

At this point, Rep. Eufanio Eriguel inquired from Dr. Taleon the estimated amount necessary to put up a 30-bed hospital as requested in the bill of Rep. Acop. In response, Dr. Taleon gave an estimated amount of 90 to 100 million pesos, inclusive of

infrastructure, equipment, personnel and others. Rep. Eriguel then shared the practice in his district which has helped defray the cost of hospitalization of their indigent patients. He said that if a 30-bed hospital is not possible at the moment, at least a smaller bed capacity health unit could be put up for a start. He added that indigents can be made to pay for health services in view of the universal PhilHealth coverage of the present administration.

Chairman Marañon inquired from Dr. Taleon the number of existing public hospitals in Antipolo and whether they are enough to cater to 800,000 people in said area. Replying to the query of the Chair, Dr. Taleon admitted that with only two (2) public and two (2) private hospitals in Antipolo City, said health facilities will not suffice to cover the population. Dr. Taleon stressed that establishment of hospitals would be based on the plan of the province which has the objective of optimizing and rationalizing the health facilities in said area. It must be based on health needs, consensus and planning workshops. The workshop conducted and participated in by the health workers and health providers in said district resulted in the need to strengthen their preventive health services and repairing RHU's and putting up barangay health centers in San Jose, San Roque and Cupang in order to provide the necessary care. Dr. Taleon added that at present, the city of Antipolo is operating a 10-bed community city hospital and there is a plan to expand this health facility. The DOH has a national program on Health Facility Enhancement to address such concern. Among its thrust is to develop local health facilities by creating a basic emergency maternal, obstetric and neonatal care at the health centers and in the barangay health stations and providing equipment and repair of facilities necessary for maternal, neonatal and child health services. Dr. Taleon assured the author that DOH will study the proposal and coordinate with his office to consider various ways of responding to the health needs of Antipolo.

At this juncture, Rep. Randolph Ting pointed out that since Antipolo is a highly urbanized city, it should have a separate hospital different from that of the province of Rizal. He even compared Antipolo's case with other provinces with the same or even less population but with existing national hospitals.

Having exhausted the discussion on the subject, Rep. Karlo Alexei Nograles moved for the approval of HB 1999. Upon motion duly seconded by Rep. Herminia Roman, and there being no objections, HB 1999 was approved.

House Bill No. 2071, entitled, An Act Establishing a Twenty-Five (25) Bed-Capacity General Hospital in the City of Malabon, Metro Manila, to be known as the Malabon City General Hospital, and Appropriating Funds Therefor, authored by Rep. Josephine Veronique Lacson-Noel

Having been recognized by the Chair, Rep. Lacson-Noel explained that Malabon City, which is part of the Metropolitan Manila, is one of the few highly urbanized cities without a public hospital. Her constituents clamoured for a public hospital to be located in the city to save them from the hassle of going to hospitals of neighbouring cities or

municipalities for proper treatment. The existing Pagamutang Bayan of the city can no longer cater to the needs of the people of Malabon.

Dr. Isauro Garcia, the Acting City Health Officer of Malabon and Engr. Benjamin Villacorta, the City Administrator expressed their full support to said proposal. Dir. Irma Asuncion, OIC Regional Director of the DOH, also expressed her appreciation of the noble intent of the author but informed Rep. Lacson-Noel of the existence of the San Lorenzo Women's hospital, a DOH "operated" secondary hospital which has a 10-bed capacity but is actually operating on a 20-bed capacity. Dir. Asuncion suggested that instead of establishing a new hospital, the existing San Lorenzo Women's hospital should be upgraded with the help of Rep. Lacson-Noel to which the latter gladly accepted.

Upon the motion of Rep. Karlo Alexei Nograles, duly seconded by Rep. Herminia Roman, and there being no objections, HB 2071 was approved subject to style and amendment.

Thereafter, the Chair called on Rep. Anna York Bondoc to expound on her bill.

House Bill No. 3331, entitled, *An Act Increasing the Bed Capacity of Jose B. Lingad Memorial General Hospital in San Fernando, Pampanga from Two Hundred Fifty (250) to Five Hundred (500), Upgrading its Services and Facilities and Professional Health Care, Authorizing the Increase of Its Medical Personnel and Appropriating Funds Therefor*, authored by Rep. Anna York Bondoc

Rep. Bondoc, author of HB No. 3331, informed the Body of her vision for Jose B. Lingad (JBL) Memorial General Hospital to be a major tertiary medical care in Metro Manila. She verbalized her hopes for JBL to be the catch basin of patients coming from the North and Central Luzon and consequently, to lessen the grossly overcrowded hospitals of Metro Manila. In addition, she cited JBL's accessibility as it is reachable through NLEX and SCTXT. She also envisions JBL to be the premiere government hospital for cancer in the country with enough facilities to address cancer diseases. And finally, since most of the medical specialists are practicing in Metro Manila due to lack of adequate facilities in the province for their specialties, the expansion of JBL will pave the way for the specialists to be able to practice in Metro Manila and still commute to Pampanga to share their specialties on cancer or cardiac care. She described the present state of the hospital as being overcrowded with patients. The hospital is actually a 250-bed hospital but is operating more than 100% of its capacity. Rep. Bondoc discloses JBL's dire situation saying that it doesn't even have a CT scan to operate and that patients are now crowding the corridor, hence, the request for expansion

Dr. Venancio Banzon, medical director of JBL hospital, expressed his full support for the passage of HB 3331. He shared the views of the author that JBL became the end-referral hospital of their neighbouring provinces. Since the hospital's bed occupancy rate has increased, he emphasized the need to expand the facilities of said hospital to accommodate indigent patients from the nearby provinces. Dr. Juliana Reyes, DOH Director-CHD for Region III also expressed her support of said bill. Rep. Herminia Roman of Bataan shared that her constituents are also beneficiaries of JBL. She disclosed the fact that she has put a portion of her Priority Development Assistance Fund (PDAF) in said hospital.

Thereafter, Rep. Herminia Roman moved for the approval of HB 3331. With the motion duly seconded and there being no objections, HB 3331 was approved.

House Bill No. 3660, entitled, An Act Converting the Northern Samar Provincial Hospital in Catarman, Northern Samar, Into Eastern Visayas Regional Hospital under the Supervision, Control and Management of the Department of Health, authored by Rep. Raul Daza.

Rep. Daza informed the Body that HB No. 3660 is a re-filed measure and that the same was approved in the House of Representatives during the 13th Congress. But due to time lack of time the Senate was not able to act on it. He narrated that when he was governor of Samar, the DOH tried to upgrade the Northern Samar Provincial Hospital from secondary to tertiary level hospital, as an alternative. However, in the span of 9 years, he observed that the upgrading according to the proposed alternative by the DOH was not encouraging. He added that even with the assistance of DOH, the hospital could not secure a tertiary level license. He reported that before he left his office as governor he lobbied with the DOH until the hospital was able to procure one (1) CT scan and two (2) dialysis machines through the help of the national government. These machines were delivered six (6) months ago. Unfortunately, the machines cannot be used due to the failure of both the DOH Regional Office and the provincial hospital to meet the requirements of pre-audit.

With the mandate of the President in alleviating the poor through a better health care service delivery, Rep. R. Daza expressed anew his hopes that the DOH would support the bill.

In response, Atty. Annabelle de Veyra, DOH Center for Health Development (CHD), Region 8 concurred with the statement of Rep. Daza on the past efforts undertaken to upgrade the Northern Samar Provincial Hospital from secondary to tertiary level hospital. She affirmed that the DOH had been working with Rep. Daza on the ground and that they are fully aware of the many issues and concerns that surround the health

needs in Northern Samar. She reported to the Body that when they conducted a health needs assessment in said province, the province wide rationalization plan incorporated a recommendation to increase the bed capacity of said hospital from 100 to 150 beds by the end of 2014. She expressed the view that despite the policy of the DOH under AO 2006-0029 which discourages any proposal that seeks to establish or upgrade any hospital, the CHD Regional office maintains its stance to recommend that the Northern Samar Provincial hospital be renationalized from level 2 to level 3 hospital but not to convert it to a regional hospital. She added that if said hospital be renationalized, the CHD suggests that source of funds and logistics support should be included in the provision of the bill so that the hospital can adequately operate under a renationalized set up of level 3 category.

Considering the urgency of the proposed measure, Rep. Nograles moved for the approval of HB No. 3660. With the motion duly seconded, the same was approved. Thereafter, the Chair called on Rep. Bondoc to expound on her measure.

V. INITIAL DELIBERATION ON THE FOLLOING NATIONAL MEASURES:

HB No. 3088, entitled, "An Act to Promote and Support Breastfeeding as an Essential Component of Family Planning and Responsible Parenthood, And For Other Purposes", authored by Anna York Bondoc

Rep. Bondoc, author of HB No. 3088, explained that the very intention of the bill is to incorporate breastfeeding as an essential part of the Family Planning seminar. She averted that since the said seminar is a legal requirement prior to marriage, the subject on breastfeeding may well be included as a form of natural family planning. The seminar, according to Rep. Bondoc, also serves as the last chance for the government to educate the couple before marriage on the merit of natural family planning, child and maternal health, ways to nourish and protect their growing family. She assured the Body that her proposal entails no cost on the part of anyone.

Ms. Corazon Del Mundo, Chairperson of Women Involved in Nation-Building (WIN) believes that promotion of breastfeeding will alleviate the problem of malnutrition in the country. Other stakeholders present, namely, Dr. Hilarion M. Henares Jr. of Heal Philippines Foundation, Dr. Elvira Henares-Esguera of Children for Breastfeeding, Mr. Alex Castro of Infant Pediatric Nutrition Association of the Philippines, Ms. Nona Andaya-Castillo from the Nurturers of the Earth, and Dr. Santiago del Rosario of the Philippine Medical Association expressed their positive views on the importance of breastfeeding.

Dr. Anthony Calibo of the DOH recommended the updating of the seminar contents to include essential intra partum and essential new born care in the bill. In response, Rep.

Bondoc welcomed Dr. Calibo's suggestion and said that it can be discussed thoroughly during the drafting of the IRR.

Upon motion duly seconded and there being no objections, HB 3088 was approved subject to style.

At this point, the Chair relinquished his post temporarily to Rep. Nograles. Thereafter, the presiding Officer called on Rep. H. Roman to expound on her measure.

House Bill No. 230, entitled, *An Act Granting Free Hospitalization Benefits in Government Hospitals to All Retired Public School Teachers Who Have Rendered a Minimum of Twenty (20) Years in Service and Providing Funds Therefor*, authored by Rep. Herminia Roman.

Rep. Roman explained that HB No. 230 seeks to provide free hospitalization benefits in government hospitals for all retired public school teachers who have rendered a minimum of twenty (20) years of service. She underscored the fact that the sacrifices and devotions of teachers in carrying out their duties and responsibilities in moulding the youth should be amply rewarded even after their retirement from the service. Subsequently, she sought approval of HB No. 230.

Dr. Taleon articulated the DOH's appreciation of the noble intention of the proposed measure. However, he pointed out that retired public school teachers are already covered by the benefits for senior citizens mandated under Republic Act No. 9994 which includes free hospital in the government hospitals. Also, retired teachers are also covered by PhilHealth. Based on the abovementioned premises, Dr. Taleon said the Department recommends the following alternative strategies: a) increase the coverage of PhilHealth benefits for retired government employees; b) strengthen public health programs at all levels of health care facilities; c) intensify health promotion campaigns to increase awareness of public school teachers on health issues and practices; and d) DOH and Department of Education (DepED) should promote, encourage and engage in scientific research on the prevention, care and treatment of common and recurring cases of sickness among public school teachers.

Having heard the stand presented by the DOH representative, Rep. Roman opined that not all retired teachers are senior citizens because some of them availed of the early retirement privilege even before reaching the required senior citizen age. Rep. Pichay, at this point, inquired whether the Philhealth coverage to non senior citizen retired public school has been put into law. Dr. Taleon replied that it is still a proposal from the DOH as one of the alternative strategies.

Upon motion duly seconded and there being no objections, HB No. 230 was approved subject to style.

House Bill Nos. 1419, 2704 and 3390, entitled, *An Act Providing for a National Mental Health Care Delivery System, Establishing for the Purpose the Philippine Council for Mental Health and Appropriating Funds Therefor*, authored by Reps. Susan Yap, Karlo Alexei Nograles and Rufus and Maximo Rodriguez Jr.

Rep. Maximo Rodriguez Jr., one of the authors of the three measures informed the Body that HB No. 3390 is a refiled bill and the same had been approved by the Committee during the 14th Congress. He noticed that HB Nos. 1419, 2704 and 3390 are almost identical in content. At this point, he moved for the consolidation and approval of the same. Prior to acting on the motion of Rep. Rodriguez, Jr., Rep. Nograles suggested hearing the opinions of the invited resource persons.

Dr. Lourdes Ladrido-Ignacio, President of the World Association for Psychological Rehabilitation Philippines (WAPR-Philippines) expressed gratitude to the authors for sponsoring the bills. She then appealed for the passage of the aforementioned mental health measures because many people have already been at risk at not only of mental disorder per se but of illnesses associated with killer diseases such as; cancer, cardiovascular, renal diseases, among others and other adverse experiences. In UP-PGH, she reported that they conducted a survey in Western Visayas where they found out that 1 out of 3 household members is positive to have a mental disorder. Likewise, in their studies in Metro Manila and Bulacan, they found out that 20 to 25% consulting primary health services have shown a diagnosable mental disorder in both children and adult and only 5% are detected by health workers. Given these facts, Dr. Ignacio believes that the proposal under consideration is much needed. In conclusion, she offered the services of their organization to DOH and Congress in the refinement of the said bill.

At this point, Rep. Bondoc inquired on the need to establish another Council specifically on mental health. She opined that it is the concern of the DOH to take care of the mental health services. He also cited that adding another layer of bureaucracy could add to government cost. She then suggested creating an adhoc body to formulate their policies and delineate the duties and responsibilities on the matter.

Dr. Ernie Vera, Medical Officer VII, Degenerative Office of the DOH said that they appreciate the intent of the bill. He said they are aware that the bill would strengthen implementation of DOH Administrative Order 2007-009 entitled, "The Operational Framework for the Sustainable Establishment on Mental Health Program." However, the DOH cannot support the establishment of a Philippine Council for Mental Health as

proposed in the bill since there is already an existing National Program Management Committee within the organizational structure of the Department. He also reported that the DOH conducted a consultative meeting relative to the refinement of the bill among stakeholders for mental health prior to the meeting of the Committee on Health. Dr. Vera shared the group's output in refining the bill to include a new provision in Section 5 and the agreement among the stakeholders to maintain the existing structure under the DOH instead of creating a new Council for this purpose.

The Chair then requested Dr. Vera to submit the pertinent documents on the output of their consultative meeting to the Committee.

Dr. Romeo Enriquez, Secretary of the Philippine Psychiatric Association Society (PPA) strongly supports the approval of a mental health law as long as the proposed bill will incorporate the following amendments: a) to institutionalize and prioritize the national mental health program thru DOH; b) assure the development and implementation of national standard in the delivery of mental health care services and education; c) prioritize mental health research and information sharing that can serve as basis for further legislation; d) advocacy for the rights of persons with mental illness and disability to include the promotion of de-stigmatization.

Dr. R. Enriquez reiterated to the Body that the National Management Committee for Mental Health under the DOH would replace the national mental health council as originally proposed in the bill. He said the PPA commends the approval of the three (3) mental health bills to include the proposed amendments.

Upon hearing the explanations of Dr. Enriquez Romeo, Rep. Bondoc expressed her satisfaction that the existing National Management Committee for Mental Health under the DOH would serve the purposes of the bill without additional cost to the government.. With this, she manifested her intention to be a co-author of HB Nos. 1419, 2704 and 3390. In conclusion, Rep. Nograles reiterated his earlier request for Dr. Romeo to submit their position paper to the Committee.

On the part of the Philippine Medical Association, Dr. Santiago Del Rosario informed the Committee that there are one hundred twenty (120) civilized countries who have mental health laws and it is sad to note that the Philippines is not one of them. He added that among the 10 highly populous countries, the Philippines ranks number 10. That means, he said, there is a high incidence of mental health problems among Filipinos. Further, he apprised the Body that there are 88 cases per 100 Filipinos with mental health problems. In the year 2020, a study projected that depression will be the dominant single cause of disability in both the developing and non-developing countries. He stressed that depression is one of the underlying conditions that lead to suicide. With this information, the Philippine Medical Association expressed their full support for the passage of the proposed mental health bill.

Having heard the positions of the stakeholders, Rep. Nograles reminded the Body of the ~~standing motion of Rep. Maximo Rodriguez Jr. to consolidate and approve the said measures.~~

With the motion duly seconded by Rep. Pichay and there being no objections, the consolidation and approval of HB Nos. 1419, 2704 and 3390 subject to amendment and style was carried. Rep. Lacson-Noel manifested that all members present will be made co-authors of the three house bills.

At this point, Chairman Marañon resumed his post as presiding officer.

Prior to the consideration of other measures, Rep. Eriguel made a manifestation to reconsider the position paper of DOH amending HB No. 988, entitled, "An Act Declaring the Month of February of Every Year as 'Liver Cancer and Hepatitis-B Awareness and Prevention Month', which the Committee approved in the previous meeting dated November 10, 2010. Said position paper was received by the Committee a day after the bill was approved at the Committee level. In said paper, the DOH seeks to amend the month of February, as originally proposed, to January of every year considering that January is earmarked for the observance the National Cancer Consciousness Week

Rep. Eriguel then moved for the reconsideration of the approval of HB No. 988 considering that the Committee secretariat has yet to finalize the Committee Report on the same.

Upon motion duly seconded and there being no objections, the motion for reconsideration of HB 988 was approved.

Rep. Eriguel further moved for the approval of the amendment as proposed by the DOH to transfer the celebration of the Liver Cancer Month from the month of February to January,

With the motion duly seconded and there being no objections, the motion was approved.

House Bill Nos. 590 and 870, entitled, An Act Establishing A Program for Public Education on Prostate Cancer, authored by Reps. Rufus and Maximo Jr. Rodriguez and Augusto Syjuco Jr.

Rep. M. Rodriguez moved for the approval of HB Nos. 590 and 870 in view of the fact that the same were already thoroughly discussed during the 14th Congress.

The Chair deferred action on the motion until the views of the resource persons have been heard.

Dr. Jaime Balingit of the Philippine Urological Association suggested that aside from educating the public on prostate cancer, efforts should be made in identifying chemical carcinogens and removing them from the food chain. He further proposed to mandate all hospitals to report to DOH all identified cases so as to have a collective data of persons suffering from prostate cancer.

Rep. Carlos Padilla inquired which, from among the various cancer diseases, ranks as number one killer. In response, Dr. Alex Asuncion of the Philippine Cancer Society said that breast cancer is the top killer cancer based on their 2010 survey. Rep. Padilla expressed his apprehension on the passage of said bill for it might confine DOH and other advocates to focus only on prostate cancer at the expense and sacrifice of all other cancer diseases. He stressed the duty of the Department of Health to ensure that there are programs for public education to raise awareness on the matter.

Dr. Ernie Vera stressed that the DOH has formulated a very comprehensive Cancer Control Program where control interventions are within the continuum of public health care. He cited that Primary prevention focuses on eliminating the causes of cancer, while Secondary Prevention focuses on early detection coupled by definitive diagnosis and treatment, supportive, palliative care and rehabilitation. Furthermore, he informed the Body that the Philippine Cancer Control Program was implemented in 1995 with the five (5) most common sites such as Lung, Breast, Liver, Cervix and prostate Cancer. For several years of implementation, it was noted that there was a gap in the level of Primary Prevention and definitive diagnosis and treatment due to limited funds.

In view of the aforementioned reasons, the Department recommends that funding support be augmented and increased, with provisions for continuous yearly increment to improve diagnostic capabilities and upgrade treatment modalities rather than establish another cancer program specific to a single site like the prostate.

Rep. Rodriguez opined that 25% of males are afflicted of prostate cancer and ultimately die because there is no cure for prostate cancer. To this effect, he emphasized that the bill seeks to establish a program to educate the public and increase its awareness on how to prevent prostate cancer. However, he stressed that he is amenable not to limit the program to prostate cancer alone but also to other types of diseases causing cancer.

Rep. Acop inquired whether the causes of prostate cancer are so divergent than any other diseases causing cancer. If not, he suggested lumping said program with other types of cancer. Mr. Asuncion replied that cancer is not a disease per se but a generic term for a group of diseases. He explained that you can differentiate them from each other through its treatment protocols, causes and symptoms and risk factors.

Rep. Eriguel inquired about the most definitive procedure to diagnose a prostate cancer. Dr. Balingit said the prostate biopsy is the most definitive procedure but screening test by means of Prostatic Specific Antigen (PSA) will do.

At this point, Mr. Asuncion enlightened the Body that the Philippine Cancer Society, Inc. (PCSI), in partnership with the DOH, published the 2010 Philippine Cancer Facts and Estimates, which reports the incidence, mortality and survival statistics on cancer. These data, he said, serve as basis for most cancer control programs in the Philippines. According to the report, prostate cancer is the fourth leading cancer site among Filipino males. It was reported that in 2010, there were 2,712 new cases and 1,410 deaths due to prostate cancer. In 2008, the estimated age standardized national incidence rate was 10.1 per 100, 000 while the mortality rate was 5.3 per 100,000 population. He added that increasing age is the most important risk factor and the increasing number of Filipino males who are 55 years and older is the main reason for the significant increase and expected continuing increases in the number of cases. It is said that early prostate cancer is asymptomatic. He added that early detection of prostate cancer is curable. In view of this information Filipino males who are 50 years old or older are advised to undergo annual digital rectal examination (DRE), prostate ultrasound or prostatic specific antigen (PSA).

The Chair requested Mr. Asuncion to submit to the Committee the data and statistics he shared with the Body. The Chair then raised the pending motion of Rep. Rodriguez to approve the bills.

Upon motion duly seconded and there being no objections, HB Nos. 590 and 870 were approved subject to style and amendments.

House Bill Nos. 592 and 1028, entitled, An Act to Provide for a National Folic Acid Education Program to Prevent Birth Defects, authored by Reps. Rufus and Maximo Jr. Rodriguez and Augusto Syjuco Jr.

Rep. Rodriguez informed the Body that HB No. 592 had been approved in the House of Representatives last Congress and transmitted to the Senate but was not acted upon due to lack of time. He stated that the bill seeks to provide a national folic acid education campaign to prevent neural tube defects considering that thousands of infants are born each year with serious birth defect of the brain and spine, called the neural tube defect. In view of the fact that this bill had undergone extensive discussion during the 14th Congress, he moved for the approval of the same.

The Chair deferred action on the motion until the views of the invited resource persons have been heard.

Dr. Calibo stated that the DOH appreciates the noble intention of the proposed measures to provide for a national folic acid education program. However, the DOH also believes that before embarking on the said program, they need to conduct further research on folic acid deficiency and its effect in preventing birth defects among

Filipinos. He reported of incidental findings of the Department that Rubella virus, German measles, metabolic and other environmental factors can also cause birth defects. He stated that the DOH is supportive of the need for a stronger Folic acid awareness program but thinks that the enactment of both bills may not be necessary at this time.

Considering that HB Nos, 592 and 1028 had been approved during the 14th Congress, Rep. Pichay moved for the approval of the same subject to amendments and style. With the motion duly seconded and there being no objection, the motion was carried.

House Bill Nos. 2984 and 3285, entitled, An Act Providing the Public with Adequate Notice and Education on the Effects of Exposure to Mercury Through the Development of Health Advisories and by Requiring that such Appropriate Advisories be Posted, or Made Readily Available, at All Businesses that Sell Fresh, Frozen, And Canned Fish and Seafood where the Potential for Mercury Exposure Exists, authored by Reps. Joseph Victor Ejercito, Rufus and Maximo Jr. Rodriguez

Rep. M. Rodriguez explained that mercury discharges into the atmosphere and surface oceans have increased two-to-five fold since the beginning of industrialized period due to human activities. He claims that substantial evidences are accumulating that exposure to methyl-mercury is now widespread. It is for this reason that this bill was filed to address the problem by providing the public with adequate notice and education on the effects of exposure to mercury.

Engr. Ana Trinidad-Rivera of DOH stated that the DOH fully agrees with the basic intent of the proposed bill. She informed the Committee that based on the existing mandates, the regulations and monitoring of fresh fish fall within the purview of the Department of Agriculture, Bureau of Fisheries and Aquatic Resources while canned and processed fish is regulated by the Food and Drugs Administration, an attached agency of the DOH.

She cited that Mercury (Hg) poisoning, both acute and chronic, involves the central nervous system (CNS) and kidneys which could be fatal. Intake of the contaminated marine and aquatic living organisms secondary to pollution of biota could be a source of exposure to Monomethylmercury (MeHg).

In view of the above information, the DOH recommends the following:

- a) that a comprehensive environment assessment, risk management, and health surveillance program should be undertaken in the identified areas with possible Hg emissions;
- b.) that programs, policies and strategies should be institutionalized to strengthen capacity of concerned government agencies;

- c) that funding and logistical resource should be provided to the concerned agency to upgrade and strengthen the services.

Joel Maleon of the Department of Environment and Natural Resources (DENR) stated that DENR is fully aware of the dangers posed by mercury to human health and the environment. He said this proposed legislation would help strengthen their program on the information and dissemination of the harmful effects of mercury. Hence, the DENR fully supports the passage of the bill.

Rep. Pichay inquired on the possibility of including cyanide substance in the bill. Rep. Rodriguez posed no objection to the suggestion. Rep. Pichay further inquired whether mercury is banned as a product. Mr. Maleon replied that mercury is not banned as a product but it is regulated under Republic Act No. 6969 specifically under DENR Administrative Order No. 38 on Chemical Control for Mercury and Mercury compounds.

Rep. Padilla manifested his support for the approval of HB Nos. 2984 and 3285.

Thereafter, Rep Pichay moved for the consolidation and approval of HB Nos. 2984 and 3285 subject to amendment and style. Upon motion duly seconded by Rep. Acop, and there being no objections, the motion was carried.

Other measures calendared for deliberation such as HB No. 606 - An Act Establishing a Special Hospital for Overseas Filipino Workers (Ofws) and their Dependents, Appropriating Funds Therefor and for other Purposes authored by Rep. Juan Edgardo Angara and HB No.1555 - An Act to Establish Wards in Government Hospitals for the Health Care Needs of Overseas Filipino Workers (OFWs) authored by Rep. Roman Romulo were not discussed due to the absence of the authors.

VI. CONSIDERATION OF THE FOLLOWING MEASURES:

1. Approval of the draft substitute bill to HB Nos. 505, 907 and 974, entitled "An Act Requiring All Government-Issued Identification Cards, Certificates And Licenses To Include A Portion Indicating The Blood Type Of The Holder Thereof And Providing Penalties For Violations Thereof," authored by Reps. Angara, J.E., Yap, S., and Syjuco,
Upon motion of Rep. Pichay, duly seconded by Rep. Acop and there being no objections, the Committee Report on the draft substitute bill to HB Nos. 505, 907 and 974 was approved.
2. Approval of the draft substitute bill to HB Nos. 83, 107, 1029, and 3472, entitled "An Act Providing For Mandatory Hepatitis B Vaccination Of All Infants Within A

Reasonable Period Of Time After Birth, And Other Vaccine-Preventable Diseases," authored by Reps. Abaya, J., Syjuco, A., Yap, S. and Cajayon, M.


Upon motion of Rep. Pichay, duly seconded by Rep. Eriguel and there being no objections noted, the Committee Report on the draft substitute bill to HB Nos. 83, 107, 1029, and 3472 was approved.

3. Approval of the draft substitute bill to HB No 950, entitled "An Act Mandating Ocular Prophylaxis on Newborns," authored by Rep. Pichay, P.
Upon motion of Rep. Eriguel, duly seconded by Rep. Acop and there being no objections, the Committee Report on the draft substitute bill to HB No. 950 was approved.
4. Approval of the draft substitute bill to HB Nos. 610 and 2846, entitled "An Act Regulating The Use Of Government Ambulances, Providing Penalties Therefor And For Other Purposes," authored by Reps. Angara, J.E. and Ejercito, J.
Upon motion of Rep. Pichay, duly seconded by Rep. Acop and there being no objection, the Committee Report on the draft substitute bill to HB Nos. 610 and 2846 was approved.


VII. ADJOURNMENT

Upon motion duly seconded and there being no objection, the meeting was adjourned at 12:39 P.M.

I hereby certify to the correctness of the foregoing minutes.


MA. LOURDES M. SANCHEZ
Acting Committee Secretary

Approved by:


REP. ALFREDO D. MARAÑON III
Chairperson
Committee on Health