



REPUBLIC OF THE PHILIPPINES

S e n a t e

Pasay City

Journal

SESSION NO. 93

Wednesday, June 1, 2005

**THIRTEENTH CONGRESS
FIRST REGULAR SESSION**

SESSION NO. 93
Wednesday, June 1, 2005

CALL TO ORDER

At 4:03 p.m., the Senate President, Hon. Franklin M. Drilon, called the session to order.

PRAYER

Sen. Edgardo J. Angara led the prayer, to wit:

Lord, help us to realize that the measure of a statesman is not revealed by his show of outward strength, or the loudness of his voice, or the force of his actions. Instead, make us understand that it is to be seen in the strength of his commitments, the genuineness of his friendships, the sincerity of his intentions, the quiet courage of his convictions, his capacity to make sacrifices, and his resolve to continue even in the face of difficulty.

Teach us, Almighty Father, to serve You as we should, to make good change and not only seek to destroy, to give and not to count the cost, fully content in knowing that we do the Lord's will.

Amen.

ROLL CALL

Upon direction of the Chair, the Secretary of the Senate, Oscar G. Yabes, called the roll, to which the following senators responded:

Angara, E. J.	Flavier, J. M.
Arroyo, J. P.	Lapid, M. L. M.
Cayetano, C. P. S.	Lim, A. S.
Defensor Santiago, M.	Magsaysay Jr., R. B.
Drilon, F. M.	Pimentel Jr., A. Q.
Ejercito Estrada, J.	Recto, R. G.
Ejercito Estrada, L. L. P.	Revilla Jr., R. B.
Enrile, J. P.	Roxas, M.

With 16 senators present, the Chair declared the presence of a quorum.

Senators Madrigal, Osmeña, Pangilinan and Villar arrived after the roll call.

Senator Gordon was on official mission.

Senators Biazon and Lacson were absent.

ANNOUNCEMENT OF SENATOR CAYETANO

Senator Cayetano announced that Senator Lacson who was not present in the hall was celebrating his birthday.

The Chair extended the Chamber's greetings to Senator Lacson.

APPROVAL OF THE JOURNAL

Upon motion of Senator Cayetano, there being no objection, the Body dispensed with the reading of the Journal of Session No. 92 and considered it approved.

REFERENCE OF BUSINESS

The Secretary of the Senate read the following matters and the Chair made the corresponding referrals:

BILL ON FIRST READING

Senate Bill No. 2031, entitled

AN ACT EXPANDING THE EXCEPTIONS FROM THE NIGHT WORK PROHIBITION OF WOMEN EMPLOYEES, THEREBY AMENDING ARTICLE 131 OF PRESIDENTIAL DECREE FOUR HUNDRED FORTY-TWO (PD 442), AS AMENDED, OTHERWISE KNOWN AS THE LABOR CODE OF THE PHILIPPINES

Introduced by Senator Pangilinan

To the Committee on Labor, Employment and Human Resources Development

✓
ms

RESOLUTION

Proposed Senate Resolution No. 270, entitled

RESOLUTION CALLING ON THE SENATE COMMITTEE ON PUBLIC SERVICES TO CONDUCT AN INVESTIGATION, IN AID OF LEGISLATION, ON THE ALLEGED INEFFICIENCY OF THE AIR TRANSPORTATION OFFICE IN MANAGING AND CONTROLLING AIR TRAFFIC IN THE NINOY AQUINO INTERNATIONAL AIRPORT AND FOR OTHER PURPOSES

Introduced by Senator Pangilinan

To the Committee on Public Services

COMMUNICATION

Letter from Undersecretary Danilo P. Cruz of the Department of Labor and Employment, dated May 10, 2005, providing the Senate with a copy of the Report to Congress of the Philippine Overseas Labor Offices (POLO) for the period January to June 2004, in accordance with the provisions of Section 33 of Republic Act No. 8042.

To the Committees on Labor, Employment and Human Resources Development; and Foreign Relations

SPECIAL ORDER

Upon motion of Senator Cayetano, there being no objection, the Body approved the transfer of Committee Report No. 25 on Senate Bill No. 2012 to the Calendar for Special Orders.

**COMMITTEE REPORT NO. 25
ON SENATE BILL NO. 2012**

Upon motion of Senator Cayetano, there being no objection, the Body considered, on Second Reading, Senate Bill No. 2012 (Committee Report No. 25), entitled

AN ACT REQUIRING MANDATORY BASIC IMMUNIZATION SERVICES AGAINST HEPATITIS-B FOR INFANTS, AMENDING FOR THE

PURPOSE PRESIDENTIAL DECREE NO. 996, AS AMENDED, AND APPROPRIATING FUNDS THEREFOR.

Pursuant to Section 67, Rule XXIII of the Rules of the Senate, with the permission of the Body, upon motion of Senator Cayetano, only the title of the bill was read without prejudice to the insertion of its full text into the Record of the Senate.

The Chair recognized Senator Cayetano for the sponsorship.

SUSPENSION OF SESSION

Upon motion of Senator Cayetano, the session was suspended to enable the staff to set up the projector.

It was 4:08 p.m.

RESUMPTION OF SESSION

At 4:10 p.m., the session was resumed.

**SPONSORSHIP SPEECH
OF SENATOR CAYETANO**

In sponsoring Senate Bill No. 2012, Senator Cayetano delivered the following speech:

**An Appeal for the Mandatory
Basic Immunization of Infants
Against Hepatitis-B**

Let me begin this speech with one question: How many of us Senators and our Senate employees have been immunized with the Hepatitis-B vaccine? I ask this question because the Hepatitis-B vaccination was not available when most of us were infants or young children. I, myself, chose to be immunized only two years ago after seeing with my own eyes what hepatitis does to the human body.

Hepatitis-B is a silent killer that stalks our country today. It has no recognizable signs or symptoms until severe damage has occurred. It is one of the major infectious diseases of humankind, and the most dreaded strain of hepatitis is the inflammation of the liver. It is caused by the Hepatitis-B Virus, or HBV, which can be

MS

transmitted through blood, sex, shared needles and from an infected mother to her newborn during delivery. This disease is more infectious than AIDS because it is about 50 to 100 times easier to transmit; a single virus particle can cause disease.

Although most people are infected in infancy or childhood, most deaths from Hepatitis-B are in adulthood, as a result of *cirrhosis and/or liver cancer*, both of which are strongly associated with the virus. Today, the World Health Organization estimates that more than 2 billion of the global population have been exposed to the virus at some point. Of this number, about 360 million are chronically infected and carriers of the virus, whose complications kill about 500,000 to 700,000 people a year. It is a growing concern in our own country where there are an estimated over 8 million Hepatitis-B carriers who could infect more Filipinos, unless the government adopts more aggressive measures to address the dreaded disease.

It is thus with keen urgency that I sponsor Senate Bill 2012, which was prepared jointly by the Committee on Health and Demography and the Committee on Finance, in substitution of Senate Bill No. 1860 that was originally filed by this representation.

Senate Bill 2012 seeks to address the problem, directly and literally, at its infancy stage by requiring "mandatory basic immunization services against Hepatitis-B for infants, amending for the purpose Presidential Decree No. 996, as amended, and appropriating funds therefor."

*HBV: Endemic in Asia
and the Philippines*

We cannot underestimate the ravages of Hepatitis-B which, as a human carcinogen, is second in importance only to tobacco.

My own father, the late Senator Rene Cayetano, fought a long battle with liver cancer. He manifested no obvious symptoms for much of his life. He was the picture of perfect health. He went to the gym regularly and practiced good eating habits.

Then, in 1998, he was diagnosed with Hepatitis-B. He was able to keep the sickness at bay with maintenance medicine. He continued to live a normal and active life and was blessed with five good years despite being diagnosed with *cirrhosis of the liver and liver cancer*. Sometime in July 2002, his health started to deteriorate. The Hepatitis-B virus had mutated and his regular medicine could not prevent the damage it inflicted on his liver. On June 24, 2003, my father passed away.

Having personally experienced how it is to live with the destruction wrought by Hepatitis-B, I am fully aware of the pain and suffering caused to both the patient and his family. I thus urgently appeal and press for the passage of this measure to prevent Hepatitis-B from claiming further lives.

In this age of globalization where economic borders are falling but war and sickness are on the rise, Hepatitis-B virus has become a major public health problem that we must all confront and resist as one. It is particularly most severe here in Southeast Asia and the Western Pacific, which have the highest incidence of Hepatitis-B in the world. An estimated 78 percent of the world's chronic carriers of Hepatitis-B reside in Asia.

HBV infection is highly endemic in the Philippines. The WHO office in the Philippines reports that approximately 60 percent of Filipinos have been exposed with HBV, while 10 percent are virus carriers.

As with all diseases, it is the youngest and most fragile of the population who are most at risk. Up to 90% of pregnant women who are HBV carriers pass the virus on to their newborn at delivery. Here in the Western Pacific region where our country belongs, around 40% of all chronic Hepatitis-B infections begin at birth through mother-to-child transmission, according to the WHO.

These children who become infected are more likely to become carriers and to develop fatal complications as adults. The WHO reports that the risk of becoming carriers depends on the age at the time of initial infection: for newborns, the risk of

✓ 1/20

becoming a carrier is 90%; for ages one month to one year, it is about 80% to 60%; whereas for adults, the risk is lower at about 10% .

Benefits of infant immunization

The point is, we must start now to protect our youngest generation today and into the future. As the old saying goes: "An ounce of prevention is worth a pound of cure." Antibiotics cannot cure Hepatitis-B. Good nutrition cannot cure Hepatitis-B. Physical exercise cannot cure Hepatitis-B and stop its progress. The only way to prevent Hepatitis-B infection is to start at the very beginning. And this can be done by implementing universal infant immunization which still remains the most effective weapon today to fight Hepatitis-B.

And herein lies the rationale of Senate Bill No. 2012 that I have the privilege of presenting today. Under Section 2, Senate Bill No. 2012 shall expand the scope of basic immunization services, specifically immunization against Hepatitis-B, to cover the following:

1. All newborn infants shall be given immunization against Hepatitis-B immediately within 24 hours after birth;
2. Infants born outside a hospital, medical clinic or the like, should be brought to any available health care facility so as to be immunized against Hepatitis-B within 24 hours after birth but not later than seven days;
3. The subsequent doses of Hepatitis-B vaccination shall be completed according to the recommended schedule of Hepatitis-B immunization, as may be provided in the Implementing Rules and Regulations under Section 4 of the measure;
4. All health care practitioners or health care workers who are administering prenatal care shall educate all pregnant mothers on the importance of giving their infants the basic immunization services.

These provisions of Senate Bill No. 2012 amend and broaden the scope of Presidential

Decree No. 996 and Republic Act No. 7846. As a backgrounder, PD 996, issued in 1976, mainly provided for five free "compulsory basic immunization" services for infants and children below eight years of age"; these were specific to tuberculosis, DPT, polio, measles, and rubella or German measles. In 1994, or 18 years after, RA 7846 was enacted which amended PD 996 to require "compulsory immunization against Hepatitis-B for infants and children below eight years old." RA 7846 further provided "that newborn infants of women with Hepatitis-B shall be given immunization within 24 hours after birth."

Senate Bill No. 2012 expands the reach of the national immunization program by requiring an immediate dose of Hepatitis-B vaccine to all infants within 24 hours of birth. This immediate dose is called the birth dose and shall be administered regardless of whether the mother is HBV-positive. This is in line with the WHO prescription for such a compulsory immunization program for all countries with a high endemic rate of HBV infections. Studies have shown that giving this birth dose among infants of highly infectious mothers provides higher protection than if given later on as it prevents the development of chronic infection from exposure to the virus in the birth canal.

A schedule of three doses of the vaccine, with the first dose given within 24 hours of birth and the next two doses by the infant's 6th and 14th week, is considered to be the most effective method for Hepatitis-B control. Section 4 of Senate Bill No. 2012 provides for Implementing Rules and Regulations by the Department of Health that shall draw up the best recommended schedules for vaccination.

Today, through massive immunization, old diseases like polio and tetanus have become virtually eradicated globally and millions of deaths and physical disabilities prevented. The benefits of early inoculation against Hepatitis-B are as obvious:

- ◆ It reduces the risk of mother-to-infant transmission, as well as early childhood infection;

J *1/8*

- ◆ It prevents the development of the carrier state in almost all individuals;
- ◆ It increases the likelihood of completing the Hepatitis-B vaccine series as well as other childhood immunizations;
- ◆ It prevents most cirrhosis and primary liver cancer in the country; and
- ◆ It is our nation's most effective means to offset the healthcare costs associated with treating Hepatitis-B and its complications.

Immunization is cheaper than treatment

Let us just for a minute compare the actual cost of infant immunization with the higher cost of treating Hepatitis-B and its complications. According to the DOH, the unit cost of one dose of HBV vaccine is only P15.30; three doses will cost around P45.90. On the other hand, a patient already infected with HBV and cirrhosis or liver cancer will have to spend at least P450,000 for Interferon injections and daily medicines for at least six months, although more than a year of treatment with these drugs is usually necessary. When all these fail, there is the option of a liver transplant which ranges from about P3 million in Taiwan to at least P11 million in the United States. Not many people can afford this. Is not therefore an ounce of prevention – by way of infant immunization – surely worth more than the heaviest pound of cure?

To date, the Hepatitis-B vaccine, the first vaccine against a major human cancer, has been given to more than 500 million persons worldwide and has proved one of the safest, most immunogenic and effective vaccines. While the Hepatitis-B vaccine will not cure chronic hepatitis, it has been found to be 95% effective in preventing chronic infections from developing. In 1992, the WHO recommended that the vaccine be integrated into the national immunization program of all countries. Most East Asian and Southeast Asian countries which introduced mass vaccination programs during the late 1980s and mid-1990s have since experienced a drastic decline in the HBV carrier rate and the number of patients with liver cancer.

Taiwan is a good example. In the early 1980s, 15% to 20% of Taiwanese were estimated to be HBV carriers. In 1984, a program of mass vaccination against Hepatitis-B was launched. By 1986, all newborns, pre-school and primary school children, and others were vaccinated. As a result, between 1989 and 1993, the proportion of babies who were born to highly infectious carrier mothers and became carriers decreased from between 86% and 96% to 12% and 14%, whereas for babies of less infectious mothers, the decrease was from between 10% and 12% to 3% and 4%. Active Hepatitis-B prevalence among children aged six years also fell, from 10.5% to 1.7%. If a 90% coverage rate of Hepatitis-B vaccination in newborns can be maintained, the HBV carrier rate in Taiwan is expected to decline to lower than 0.1% by year 2010.

Reduction in the number of Hepatitis-B chronic carriers has also been seen in Indonesia. A mass infant Hepatitis-B immunization project (age 0-3) was undertaken from November 1987 to October 1991 in the island of Lombok, east of Bali. This successfully resulted in the overall reduction in HBV prevalence from 6.2% to 1.9% or 70%.

The Philippines, on the other hand, has a long, long way to go. Hepatitis-B vaccine was integrated into the national Expanded Immunization Program (EIP) in 1991, targeting 40% of infants with a 10% annual increase until 100% would be realized by 1996. But to date, the country's Hepatitis-B immunization still remains at 40%, according to the DOH and WHO.

What are the consequences of this? This simply means that with the failure of the current Hepatitis-B vaccine coverage to expand, 60% of the projected 2.5 million children/infants born this year, in other words, 1.5 million children, will be exposed to the Hepatitis-B virus and 300,000 of them will become carriers. Of this number, 60,000 will possibly die from complications of Hepatitis-B like cirrhosis and liver cancer.

These are a lot of lives that will be lost to Hepatitis-B, a lot of lives and families

✓ Mb

that will suffer unnecessarily because of Hepatitis-B.

Who will dispute the argument that immunization is the way for us as a community of human beings to stand together for our health and for our children? Not only does vaccination help each individual child who receives it, it helps all of us. The higher the percentage of the population that is immunized, the risks of infection drop dramatically for each of us.

In relation to this, I filed Senate Bill No. 2027 declaring the month of February of every year as "National Liver Cancer and Hepatitis-B Awareness Month." This bill aims to promote education and awareness about Hepatitis-B and the need for immunization starting at infancy to combat the spread of this communicable disease. I would also like to propose a national campaign plan for the eradication of Hepatitis-B through mass immunization in all communities through collaborative inter-agency and multisectoral efforts under the lead of the Department of Health.

I know that the task of enforcing a sustained immunization program against Hepatitis-B is daunting, especially with our country's economic difficulties. But the alternative is worse, if we think of the number of people who will die and the number of people they will infect in their life if we do not do anything to help them now – yes, now, at this very moment when the disease is spreading and the need to fight it is greatest.

The objective is clear: Hepatitis-B vaccination saves lives. And we, who write the laws, have the vested power to legislate mandatory immunization against Hepatitis-B of all infants at birth, and ensure that those who have become exposed to it without their knowledge are protected against the deadly disease. Only such a policy of compulsory immunization can reduce the number of new infections and move us closer to achieving our national goal of a healthier Philippines.

It is not too late for us adults to get immunized. But more importantly, we as

legislators must ensure that our children are immunized now, not just 40% of our infants, but all the infants born in the country.

The Constitution mandates that we protect and promote the right to health and ensure the survival, protection and development of the present and future generations. I thus ask that we all join hands in supporting the important, bipartisan passage of Senate Bill No. 2012.

INTERPELLATION OF SENATOR ENRILE

At the outset, Senator Enrile observed that statistics from the World Health Organization show that the Hepatitis-B virus is highly endemic in the region of Asia at 78%, while it is 16% in Africa, and 3% in the regions of South America, Europe, North America and Oceania.

Asked about the base of these percentages, Senator Cayetano explained that the statistics are based on the estimated number of people worldwide who are carriers of the disease. She said that the Hepatitis-B antigen is genetically preconditioned in Asia but whether it can be attributed to climate, race, topography or the degree of economic and social development has not been determined by WHO to date.

As to the effects of immunization, Senator Cayetano revealed that people who had contracted the virus did not respond positively to the immunization but neither did they deteriorate; on the other hand, persons immunized have a 95% success rate that they would no longer be carriers nor would they experience chronic hepatitis.

Moreover, Senator Cayetano stated that the WHO conducted at least 30 different studies in the 1980s in all the continents and the results showed a drastic decline on the incidence of hepatitis from 12% to 2% in countries which have undergone the 20-year immunization program. She pointed out that a higher success rate is expected if infants and children are subjected to immunization for a longer period of time. Eventually, Hepatitis could be eradicated in 20 to 30 years, she added.

Senator Cayetano stated that the WHO has dedicated many years of study to hepatitis, liver cancer and cirrhosis. For instance, she cited a mass

✓ 1/2

infant Hepatitis-B immunization project that was conducted in Lombok, Indonesia which showed an overall reduction in HBV prevalence from 6.2% to 1.9%; and this project became the basis for the national immunization program for infants in that country. Other countries like Malaysia also had vaccination and intervention programs that have brought down the incidence of Hepatitis-B, she said.

She pointed out that Singapore had also a national childhood Hepatitis-B vaccination program that was implemented in phases starting with babies born to carrier mothers on October 1, 1985, and extended to newborns on September 1, 1987. From 1994-1996, she said that more than 90% of children completed the full schedule of immunization by one year of age while 85% received vaccination upon school entry at age six. She noted that follow-up on the two groups of vaccinated children showed that perinatal transmission was reduced by 80% to 100% while horizontal transmission declined through other health measures. She disclosed that the incidence of acute Hepatitis-B declined from 10.4% per 100,000 in 1985 to just 4.8% per 100,000 in 1996 while morbidity fell from 10.4% per 100,000 in 1985 to 4.5% per 100,000 in 1997.

As regards the Indonesian program, Senator Cayetano reiterated that the Lombok study which started in 1987 and continued for four years revealed a decline on carrier rate from 6.2% to 1.9%. When the study ended in 1991, she said, the country made it the basis for a national immunization program for infants.

In the Philippines, Senator Cayetano pointed out that studies were conducted in Cebu and Laguna. She explained that the present law provides that only children with infected mothers are subject to the immunization but the bill proposes to cover all children. She said that she would provide Senator Enrile with the list of countries where studies have been done.

On another matter, Senator Cayetano stated that there are a number of entities that are authorized to produce the hepatitis vaccine. She informed the Body that the vaccines procured by DOH are provided by UNICEF at the cost of P15.30 per dose or a total of P45.90 for the required three doses.

As regards the annual birth rate worldwide, Senator Cayetano stated that the estimate is 180 million births in a year and that at present, the world population is at six billion.

On whether the vaccines are marketed by local or foreign pharmaceutical companies in the country, Senator Cayetano disclosed that the UNICEF sources its vaccines from foreign companies, namely: Green Cross and Lucky Gold Star from the Republic of Korea; Merck from the U.S.A.; CIGB from Cuba; Glaxo-Smith Klein from Belgium; and Santa Biotech from India. She added that Glaxo-Smith Klein markets the vaccines locally.

Senator Enrile noted that at the annual rate of 180 million births worldwide, multiplied by the current peso rate of P45 per head, the hepatitis vaccine is almost a trillion-peso global business yearly.

Asked about the country's mortality rate vis-a-vis age levels, Senator Cayetano reported that per studies made by the Philippine Cancer Society, more than 7,000 deaths occur every year but the figure is underrated as only hospital cases are reported. She explained that 10% of 80 million Filipinos or eight million are carriers, of which 20% are chronic cases which could lead to cirrhosis, liver cancer and other serious ailments. She clarified that very few people would die of hepatitis itself but since the disease leads to liver cancer and cirrhosis, around two million of the eight million carriers would eventually die of liver diseases. She said that hepatitis infection is more prevalent among the youngest of the population but liver cirrhosis and cancer are manifested in adulthood. But she stated that some persons afflicted with cirrhosis for many years could die of old age, hypertension, diabetes and other diseases.

Compared to other diseases like typhoid, dysentery, dengue and malaria, Senator Cayetano revealed that worldwide with the exception of malaria and tuberculosis, Hepatitis-B causes more deaths.* She said that according to the WHO representative, an estimated 60,000 people would die from the hepatitis virus, cutting across the economic classes. She said that the morbidity and mortality rates are proportional to the socio-economic strata, thus, if there are more people in classes D and E, there would be more people infected with and dying of hepatitis in the same classes.

*As corrected by Senator Cayetano on June 6, 2005

Asked if the immunization program proposed in the bill would be compulsory, Senator Cayetano replied in the affirmative. She informed the Body that all other immunization programs are compulsory. She stated that the compulsory vaccination program has been adopted by many countries as the only way to effectively address the prevalence of various diseases. She related that the program on compulsory vaccination for five diseases was initiated by virtue of a presidential decree in 1976 and upon the recommendation of WHO, hepatitis was included in 1991; in 1994, RA 7846 was enacted, appropriating funds for hepatitis vaccination. She affirmed that the government has been funding the immunization program since 1976.

Asked about sanctions should a person refuse to undergo the mandatory vaccination, Senator Cayetano replied that no such provision is found in any immunization law. She said that the law mandates DOH to implement the program but the department has appropriated only 40% of the needed funds for the implementation.

Citing Section 1 of the bill, Senator Enrile inquired how parents who live in remote areas could have their children immunized within 24 hours after birth if there are no hospitals in the area. Senator Cayetano stated that midwives and barangay health workers go directly to the people who need immunization most.* She said that allocations are sent directly to the areas which have the least success rates in order to give children a chance to be immunized. She stressed that the importance of vaccination was provided for in the bill in order to impress on the DOH, its health care providers and prenatal caregivers the need to take action in ensuring that parents have their children immunized at the soonest possible time.

As regards the schedule of doses, Senator Cayetano explained that the recommended immunization period is first, at birth; next, at six weeks; then, at 14 weeks. If the infant is given the birth dose but the second and third doses are not administered, she explained that a few days' delay would not affect the effectivity of the vaccine but a prolonged delay and the eventual non-immunization for the following doses would reduce the effectiveness of the immunization to less than 30%. However, she pointed out that the current practice is to have multiple doses of the vaccines injected to infants.

*As corrected by Senator Cayetano on June 6, 2005

Replying to further queries, Senator Cayetano explained that a harmless protein of the virus, not its weaker strain, is actually introduced in the vaccine. She said that the protein cannot replicate like the hepatitis virus. She informed the Body that failure to complete the required doses would not inflict damage to one's body other than exposing himself to the risk of contracting the virus. A second dose, she said, would have a 60% effectivity. Moreover, Senator Cayetano disclosed that Presidential Decree No. 996 which makes it compulsory for parents and guardians to submit their children to basic immunization services has penal provisions which are not enforced. She agreed with Senator Enrile that failure to enforce sanctions makes a law useless and engenders a culture of lawlessness among the people. She expressed the view that the mandatory immunization service against Hepatitis-B should be the collective efforts among the national and local governments, the private sector and the mothers.

As to the required appropriation, Senator Cayetano informed the Body that the DOH requires P162 million to vaccinate 100% of the target population with the Hepatitis-B vaccine.* The present budget of P52 million covers only 34% to 40% of the need, she said. She disclosed that data from other countries showed 95% effectivity for those who have been immunized, but she lamented the unavailability of such data on the Philippine situation. She agreed to the observation that different races have different susceptibility to certain diseases.

INQUIRIES OF THE CHAIR

Asked by the Chair if the present allocation of P52 million would be increased to P162 million in the proposed measure, Senator Cayetano replied that the proposed budget is P162,593,909 for 2005 based on 2.5 million births. She explained that the computation included the transportation and handling costs but the annual allocation would also depend on the bulk price of vaccine at a projected 3% increase in birth date per annum.

REMARKS OF SENATOR ROXAS

Saying that he also personally suffered from the loss of a father and a brother who both died from Hepatitis-B, Senator Roxas expressed his whole-hearted support for the efforts of Senator Cayetano in ensuring that the immunization program be put in place so that the succeeding generations would

*As corrected by Senator Cayetano on June 6, 2005

not be vulnerable to the disease which studies have shown to be an Asian affliction. He said that China, Japan, Taiwan and Korea have the latest technology in fighting Hepatitis-B.

COAUTHOR

Thereupon, with the permission of Senator Cayetano, Senator Roxas was made coauthor of the proposed measure.

INTERPELLATION OF SENATOR EJERCITO ESTRADA (J)

At the onset, Senator Ejercito Estrada (J) recalled that at the age of 25 years, he was diagnosed with Hepatitis-B and was told that he had only 10 years to live. He asked whether the disease is caused by the kind of food one eats.

Senator Cayetano clarified that Hepatitis-A virus is food-borne, transferable in the workplace, and is very curable, but Hepatitis-B is a deadly acquired disease, its most common cause of which is prenatal infection from mother to the newly born infant. Other causes, she pointed out, are sexual contacts, unsafe injections, blood transfusions and even child-to-child transmissions. She disclosed that infants, because of their low resistance, are very susceptible to infection which is why immunization at birth is recommended. She said that child-to-child transmission occurs when there is an exchange of body fluids like saliva which is very common when children play. Although the chance of transmission among adults is quite low, she said that sexual activity should be engaged with caution.

At this juncture, Senator Recto queried if it would be accurate to say that there are more women with Hepatitis-B than men.

Senator Cayetano clarified that more men have Hepatitis-B than women.

Asked by Senator Ejercito Estrada (J) about Hepatitis-C, Senator Cayetano replied that Hepatitis-C is deadlier and there is no vaccine for it.

She explained that Hepatitis-C is a viral form of hepatitis which has a fulminant course, causing chronic liver cirrhosis and an elevated risk of liver cancer.

As regards the number of Filipinos afflicted with Hepatitis-C, Senator Cayetano said that it has less than 2% incidence rate. She added that when she was in the U.S. attending to her father who was undergoing treatment for his liver problem, the doctors said that Hepatitis-B is common among Asians.

Asked if drinking liquor will aggravate the disease, Senator Cayetano affirmed that liquor aggravates the condition of one who is afflicted with hepatitis which attacks the liver. Upon further queries, she disclosed that 20% of Hepatitis-B carriers will die of liver-related disease, which usually occurs in the later stage of adulthood. For instance, she said, it is not uncommon for Hepatitis-C to affect anyone and produce chronic illness in his 50s or 60s.

Finally, Senator Cayetano stated that statistics show that 60 out of 100 Filipinos, at some point, have been exposed to the Hepatitis-B virus, but regular blood tests can ensure that, as in the case of Senator Ejercito Estrada (J), one does not develop into a chronic carrier.

COAUTHOR

Thereafter, upon his request, Senator Cayetano manifested that Senator Ejercito Estrada (J) is coauthor of Senate Bill No. 2012.

INTERPELLATION OF SENATOR ANGARA

At the outset, Senator Angara commended Senator Cayetano for bringing out in the open the public health issue of Hepatitis-B. Based on the sponsorship speech, he noted that the number of infants vulnerable to Hepatitis-B that would be needing immunization is about 2.5 million, the projected number of births, but that at present only 40% of the target population receives immunization.

Senator Cayetano agreed. Further, she affirmed that about 60% of the population is vulnerable to Hepatitis-B and that 10% or roughly eight million to 10 million Filipinos are active carriers.

On the observation that other countries like Taiwan and Indonesia took 20 years to reduce the incidence of Hepatitis-B to a manageable level, Senator Cayetano informed the Body that the Department of Health jumpstarted the immunization program in 1992 but the law was enacted only in

Handwritten signature

1994. She stressed that a 100% immunization level must be reached for the program to be effective.

Senator Angara bewailed that such a half-hearted response might not enable the government to lick a serious public health problem.

On the budget for the government's immunization program, Senator Cayetano stated that the entire immunization program for all six diseases has an allocation of P316 million but P162 million is required for a 100% coverage for hepatitis alone. At the moment, she said, the immunization program for hepatitis is underfunded at less than 40% or only P52 million despite the increase in the number of babies born every year.

On the statement of the director of the Research Institute on Tropical Medicine that buying unbranded vaccine will effect a savings of 10%, Senator Cayetano explained that the vaccine self-sufficiency program of the DOH under the RITM has three stages, namely, the purchase of naked vials of the vaccine which RITM will label, pack and store, which will result in a 10% savings; the purchase of Hepatitis-B vaccines in bulk containers for filling into injection devices which would produce a savings of about 20% to 30%; and finally, the provision of additional facilities to produce the vaccine from raw materials which would create a total savings of 50%. She stressed that the vaccine self-sufficiency program is a laudable project but would need a lot of planning and support.

Senator Angara said that to sustain an immunization program against Hepatitis-B would require P162 million annually, part of which is funded by a loan from the World Bank. Senator Cayetano affirmed that WB funding would expire at the end of 2005.

At this juncture, replying to the Chair's query, Senator Cayetano clarified that the present budget for Hepatitis-B vaccines is P52 million but the budgetary requirement for a 100% coverage is P162 million. She explained that the entire P316 million budget for the whole immunization program is financed by way of loan from the World Bank.

If the goal to eradicate Hepatitis-B will require a minimum of 20 years in order to achieve a 100% level of vaccination, Senator Angara asked how this public health issue would be addressed given that, at present, the level of vaccination is only at 40%

and financing is erratic and uncertain. Senator Cayetano posited that the Body must prioritize the DOH budget even as she maintained that she has always fought for the budget allocation for basic social services, especially health and education. She believed that it will require political will to make a conscious effort to provide funds for preventive measures which are more economical than curative action.

Relative thereto, Senator Angara recalled that during the Senators' strategic planning workshop, immunization and vaccination programs were identified as necessary and priority interventions. He stressed that it does not take so much to fund this type of programs considering that P360 million is relatively small and that the country can produce its own vaccines. He believed that such funding can be allocated in the next budget deliberations, if the Body so decides.

Asked how many children die because of lack of immunization, Senator Cayetano replied that there is a fairly successful rate for the immunization programs of the other five diseases since they have been in place since the 1970s. It is only hepatitis that needs more attention, she said, with an exposure rate of 60% or 1.5 million infants every year unless something is done.

Senator Angara expressed confidence that Hepatitis-B can be licked given the success in the other deadly diseases. With eight million to ten million Filipinos being active carriers, he pointed out that Hepatitis-B should be a priority public health problem.

He believed that the P160 million needed for a 100% coverage for Hepatitis immunization is merely a drop in the bucket of Pagcor's income or even of the P150 billion expected revenue from the new VAT law. He stressed that the fund is a very small investment towards preventing a serious public health hazard. He urged the Members to join Senator Cayetano in pushing for an increase in the immunization allocation during the budget period as implementing the long-term program on a stop-and-go basis would render the initial work in vain. Senator Cayetano underscored the urgency of the situation and expressed hope that hepatitis and other health issues would be supported by the Members.

On how the Department of Health is solving the delay in the delivery and distribution of vaccines,

✓
16

Senator Cayetano recalled that the municipal health officers during the hearings expressed their concern over the delay in the delivery of the vaccines which reach the communities barely a few months before expiration date. She hoped to work with the DOH in making the handling and distribution process more efficient. She affirmed that Hepatitis vaccines require refrigeration but once opened, could be held under very strict storage conditions for four weeks.

Asked how barangays without electricity and refrigeration facilities could be serviced, Senator Cayetano explained that municipal health offices in said barangays hold an immunization day for babies. She said that the bill requires a birth dose and also provides for vaccination within seven days after birth for infants born outside a health center.

On the observation that most children in the provinces are born at home, Senator Cayetano disclosed that health service providers and health workers conduct home visits to vaccinate newborns. She expressed hope that such programs could be tightened to increase the effectivity of hepatitis vaccination.

INTERPELLATION OF SENATOR PIMENTEL

Asked by Senator Pimentel to identify the source of the Hepatitis-B vaccines, Senator Cayetano replied that the medicine is sourced from the UNICEF. However, she pointed out that the Research Institute for Tropical Medicine (RITM) is undertaking a Vaccine Self-Sufficiency Program (VSSP) in the long term.

On whether part of the funds used for vaccine purchases are loans from the World Bank, Senator Cayetano replied that the entire immunization budget is financed through loans from the World Bank but WB does not dictate to the Philippine government where to get these medicines. She recalled that RITM Director Olveda had explained that the loan only allows the Philippines to purchase medicines but not to conduct its VSSP. Senator Pimentel pointed out that while some loans are looked upon as acts of generosity, several loan packages come with strings attached, for instance, the lender would dictate how the money should be used. Senator Cayetano agreed, adding that the government should be aware of such things.

Upon further queries, Senator Cayetano replied that the UNICEF makes bulk purchases of the vaccines from a number of suppliers in Korea, USA, Cuba, Belgium and India and that, in turn, other countries buy these medicines from the UNICEF. She also affirmed that the UNICEF gets the best prices for such medicines, noting that India, which is the source of the UNICEF for the Philippine requirement, offers the lowest prices for quality drugs.

Additionally, Senator Cayetano expressed concern that while the DOH could save a lot if it produced these medicines locally, such benefits should be considered against the foreign investments generated and the globally competitive prices.

Moreover, Senator Cayetano explained that the Philippines has already gone through the first of several phases to attain self-sufficiency in its vaccination program. This, she said, includes the production plant for BCG, purification facilities for anti-venom and equine rabies immunoglobulin (ERIG), facilities for cold storage of vaccines, labeling and packaging areas, and chemical laboratories, among other things. She pointed out that the DOH still needs P1 billion to complete the facilities as the P500 million had been spent for the first phase.

Senator Pimentel expressed hope that the P500 million would not be wasted because of a delay in the completion of the project. Senator Cayetano clarified that the completion of the first phase enabled the RITM to produce BCG and anti-venom vaccines which would be available in the market next year.

Senator Pimentel stressed that the Members would need specific data in order to help the project but the DOH should take the initiative to make the plan a reality.

Asked on the vaccines to be manufactured under the VSSP, Senator Cayetano said that the program involves the production of various vaccines. Moreover, she pointed out that with P260 million, the government could undertake the first two phases of the Hepatitis-B vaccination program, namely, the purchase of the naked vials which are labeled and repacked in local facilities and the establishment of the aseptic filling line for the transfer of Hepatitis vaccine from bulk containers to injection devices.

[Handwritten signature]

Senator Pimentel noted that even with its limited resources, the government tends to bite off more than it could chew. He surmised that if the P300 million Hepatitis-B project is pushed through, the government would have started something concrete to address the dreaded disease. He suggested that for the coming budget, the Body insist on categorizing definite amounts for specific projects targeting Hepatitis and, later on, other diseases but this should be done serially due to obvious constraints.

Upon further queries, Senator Cayetano stated that the government purchases medicines from Denmark through UNICEF which identifies the supplier. Assuming every newborn is immunized, she said that doubling the present P316 million annual allocation would be a comfortable figure.

Senator Pimentel believed that with the support of all the Members, the budgetary requirement for the program can be inserted in the annual budget of the government. He expressed support to the bill and urged the Body to pass it.

SUSPENSION OF CONSIDERATION OF SENATE BILL NO. 2012

Upon motion of Senator Cayetano, there being no objection, the Body suspended consideration of the bill.

SUSPENSION OF SESSION

Upon motion of Senator Cayetano, the session was suspended.

It was 6:08 p.m.

RESUMPTION OF SESSION

At 6:08 p.m., the session was resumed.

ADDITIONAL REFERENCE OF BUSINESS

The Secretary of the Senate read the following matters and the Chair made the corresponding referrals:

BILLS ON FIRST READING

Senate Bill No. 2032, entitled

**AN ACT ESTABLISHING AN
INTERNATIONAL COMPENSATION**

**FUND FOR OIL POLLUTION
DAMAGE, PROVIDING PENALTIES
THEREOF, AND FOR OTHER
PURPOSES**

Introduced by Senator Angara

**To the Committees on Environment and
Natural Resources; and Finance**

Senate Bill No. 2033, entitled

**AN ACT INSTITUTIONALIZING THE
GRANT OF STUDENT FARE
DISCOUNT PRIVILEGES ON LAND,
WATER AND AIR TRANSPORT
UTILITIES AND FOR OTHER
PURPOSES**

Introduced by Senator Angara

**To the Committee on Education, Arts and
Culture**

RESOLUTION

Proposed Senate Resolution No. 271, entitled

**RESOLUTION DIRECTING THE SENATE
COMMITTEE ON TRADE AND
COMMERCE, AS PRIMARY
COMMITTEE, AND THE COMMITTEE
ON SOCIAL JUSTICE, WELFARE
AND RURAL DEVELOPMENT, AS
SECONDARY COMMITTEE, TO
CONDUCT AN INQUIRY, IN AID
OF LEGISLATION, INTO THE
OPERATIONS IN THE PRE-NEED
INDUSTRY AND THE ADEQUACY
OF THE REGULATORY REGIME IN
PROTECTING THE SMALL
CONSUMERS FROM THE EXCESSES
OF PRE-NEED COMPANIES**

Introduced by Senator Serge Osmeña

**To the Committees on Banks, Financial
Institutions and Currencies; and Trade and
Commerce**

REMARKS OF SENATOR OSMEÑA

Senator Osmeña stated that Proposed Senate Resolution No. 271 which he authored directs the

✓ 16

Committee on Trade and Commerce as the primary committee and the Committee on Social Justice, Welfare and Development as the secondary committee, to listen to the complaints of the planholders in the pre-need industry. He noted that several other resolutions on the same topic had been referred primarily to the Committee on Banks, Financial Institutions and Currencies and, secondarily, to the Committee on Trade and Commerce.

Senator Osmeña said that the original hearing was triggered by a privilege speech that he delivered on January 31 complaining about, among other things, the Senate's subscription to the CAP Health as its health insurance carrier for its employees and associates when, in fact, CAP has been in financial trouble for some time. He recalled that as early as 2002, the Committee on Banks, Financial Institutions and Currencies, then chaired by Senator Magsaysay, conducted four hearings into the finances of CAP which, at that time, was already short in its trust fund by around P5 billion. He noted that between 2002 and the February 4, 2005 hearing, CAP's deficit of P5 billion has widened to P17 billion, such that its trust fund was only P8.7 billion as of December 31, 2004 instead of the supposed P25 billion. He added that the hearing included discussions not only on the problems of CAP but also on the pre-need code. Last Tuesday, he said, another hearing was conducted; however, upon learning that it could be the only hearing on the pre-need code, he wrote a letter to Senator Angara requesting the Committee on Banks, Financial Institutions and Currencies to conduct a series of hearings into the problems plaguing the CAP and the Pacific Plans, especially in the light of the report of the Securities and Exchange Commission that CAP's trust fund had dissipated to only P4.7 billion as of last week. He expressed disagreement to the Committee's assumption that the hearings on the problems of CAP would be separate from that of the pre-need code. Since an inquiry into the problems of CAP is in aid of legislation, he believed that it is but proper for the Senate to identify mistakes committed by the regulator and the pre-need company in order to craft an effective regulatory code for the pre-need industry. He also objected to the Committee's proposal to hold only one more hearing on the pre-need code.

Senator Osmeña said that Senator Angara, in reply, wrote that the Committee should focus first on the pre-need code to come up with a solution to

the problem such as that plaguing CAP and Pacific Plans, which issues can be tackled in a separate hearing because he (Senator Angara) felt that highlighting the problem rather than focusing on a solution would simply inflame passion and unwittingly aggravate the troubles of the industry.

Senator Osmeña said that in the same letter, he was told that the Committee is giving him the opportunity to submit his suggestions.

Senator Osmeña informed the Body that his office has been receiving numerous complaints from consumers requesting that the Senate continue with its inquiry into the problems of CAP and the pre-need industry. He believed that the Committee should first talk to the people who are directly suffering from this problem in order to come up with the right solution. He said that CAP alone has 780,000 planholders while Pacific Plans has about 300,000. He said that he filed the resolution to allow other committees to conduct the hearings for consumer protection because the problem is not only a banking or financial matter.

As former chair of the Committee on Banks, Financial Institutions and Currencies, Senator Osmeña said that he has been very concerned with the development of capital markets and had hoped that Congress would be able to resolve the problem of pre-need industry much sooner than expected. Adverting to the resolution filed by Senator Enrile investigating the Standard Chartered Bank for selling securities that were not registered, he noted that five hearings had already been conducted for the purpose. Relative thereto, he stated that under the rules, any matter that has not been acted upon within 30 session days by the committee to which it had been assigned can be brought straight to the floor upon a written request by five senators. He then made reservation to deliver a privilege speech on Tuesday to report to the Body what exactly had happened to CAP in the interim.

Senator Osmeña reiterated his objection to the referral of Proposed Senate Resolution No. 271 primarily to the Committee on Banks, Financial Institutions and Currencies as he insisted that the Committee on Trade and Commerce should be the primary committee because the resolution, in effect, is in aid of amending the Consumer Code.

✓ MS

REMARKS OF SENATOR ANGARA

In reaction, Senator Angara stated that Senator Osmeña's proposition is a clever way of ousting a committee of its jurisdiction. He rejected the underlying assumption made by Senator Osmeña that the Committee on Banks, Financial Institutions and Currencies has not been acting on the issue of CAP and Pacific Plans. In fact, he said, the two previous resolutions of Senators Defensor Santiago and Pangilinan which were filed ahead of Senator Osmeña's were referred to the Committee on Banks, Financial Institutions and Currencies.

Senator Angara said that he takes his work quite seriously and he believed that the Committee on Banks, Financial Institutions and Currencies is a performing committee. As he stated in his letter to Senator Osmeña, he reiterated that he wants, first of all, to put together the code which would provide the solution to what is happening at present in the pre-need industry which is a regulatory regime; that the Committee intends to set up a protection fund for planholders under a provision requiring the pre-need companies to increase their contribution to the trust fund; and finally, that the Committee would be imposing stiff sanctions on any venality or wrongdoing.

Senator Angara informed the Body that the Committee on Banks, Financial Institutions and Currencies would set a hearing on the second or third week of June in order to finish the problem on the pre-need industry.

Senator Angara stressed that Senator Osmeña is always welcome to raise his points during the hearings, but he believed that Senator Osmeña should not exclude the Committee on Banks from its jurisdiction over the issue, even as he expressed support to the recommendation of the Secretariat referring Proposed Senate Resolution No. 271 to the Committee on Banks as the primary committee. He stressed that he was not in need of extra work as he was already doing his share of the work in the Chamber. He contended that Senator Osmeña is known for making reservations to interpellate without following through, delaying many bills such as the Credit Information Bureau bill. He maintained that the senators should meet in caucus in order to stop devious techniques from being resorted to.

Senator Osmeña stated that he could not understand how his move could be considered devious as he was the principal author of the resolution. As regards the Securitization Code, he clarified that he took over the Committee on Banks in June 2003 upon the request of the Senate President and Senator Magsaysay who had become very busy with the Anti-Money Laundering Act. He said that he proceeded to study the Securitization bill which was sponsored by Senator Magsaysay in January 2003; Senator Angara was the last to make reservations to interpellate on the bill which took three months to pass on Second Reading because of that reservation.

On the matter of the Credit Information Bureau bill, Senator Osmeña admitted that he would have proceeded with his interpellation on the bill but he did not because Senator Angara favored holding five hearings on the Standard Chartered Bank issue which had two complainants against the CAP which affected 780,000 planholders.

On the Pre-Need Code bill, Senator Osmeña argued that Senator Angara's proposals like the protection fund are all in the bill, of which he is the principal author. If he was clever, he said it was because he learned from his seniors in the Chamber. But he denied that he delays bills deliberately. In the case of the VAT bill, he pointed out that he did not allow the VAT to be passed until he had fully understood it and had entered three amendments to the bill. He said that it would have been a popular move to delay the VAT bill simply because people do not like taxes but he did not do that; instead, he cooperated intelligently to its passage.

As to the pre-need issue, Senator Osmeña expressed the view that the planholders should be heard first in an open hearing as the Senate is not for the Members alone. He disagreed to the idea of creating a technical working group composed of the staff of the authors of the bills to look into the matter as Senator Angara had suggested during the hearing. He stressed that he wanted to listen to these people who were cheated of their hope for the future. He contended that the Senate could have pressured the SEC to protect the planholders to counter the tremendous pressure coming from powerful quarters to allow the CAP to continue.

At this point, Senator Osmeña asked whether a secondary committee can hold separate hearings

under Section 25 of the rules. The Chair said that it was not ready to reply on the matter as it had to review the records in the absence of the Majority Leader.

Senator Angara informed the Body that contrary to Senator Osmeña's allegations, the Committee wanted to listen to the planholders; it was simply a question of timing as the Committee was faced with a pre-need code which has been pending for the past two Congresses. He said that after six public hearings, voluminous materials and testimonies of many resource persons, he felt that it was time to pass the code.

As to Senator Osmeña's query, Senator Angara disagreed that the secondary committee can meet separately from the primary committee, as the referral is for a joint committee hearing; otherwise, the referral could very well be to both committees as primary committees. He averred that the rules are not only for orderly proceedings in the Chamber but also for the division of labor in the Senate. He said that if Senator Osmeña wants the Committee on Social Justice, Welfare and Rural Development to conduct the hearings on CAP, the latter could do so.

Senator Osmeña replied that he might do so because all he wanted to do is to get educated on the issue. He stated that the Chairman of the Committee on Banks cannot claim that he has covered the topic just because six hearings have been conducted. He said that problems that did not manifest in 2002 like the PPI's spin-off were not foreseen before.

He said that what he resented was that he had been asking Senator Angara to no avail to hold hearings on the CAP since February. He revealed that every time a planholder would ask him when CAP would be investigated, he did not know what to say. He stressed that the planholders were not looking for solutions to the regulation of the industry; they simply wanted to know if they would get paid or not.

Senator Osmeña stated that while he had always tried to respect the Rules, one person can bottle up the proceedings, for which there must be a solution.

Senator Angara pointed out that a petition of five members can bring the matter to the plenary.

But Senator Osmeña believed that such would be an extreme solution since planholders cannot speak on the floor.

Senator Angara contended that Senator Osmeña was dodging the issue on proper jurisdiction of a committee being raised before the Chamber as there was no issue of any Senate committee refusing to listen to the planholders. At last Tuesday's meeting, he said, he told the planholders that another meeting would be set for them to air their sentiments.

Finally, Senator Angara opined that Senator Osmeña, precisely, is one man who can bottle up proceedings in the Chamber as shown in the credit bureau bill and other bills which have been delayed.

Senator Osmeña said that if Senator Angara was referring to the ACEF bill, it was Senator Magsaysay who did not wish to be interpellated. He said that he did not recall Senator Angara offering to be interpellated as the coauthor of the bill.

SUSPENSION OF SESSION

With permission of the Body, the Chair suspended the session.

It was 6:44 p.m.

RESUMPTION OF SESSION

At 6:49 p.m., the session was resumed.

RULING OF THE CHAIR

Upon resumption, the Chair stated that the issue raised by Senator Osmeña involved the interpretation of the rules and the jurisdiction of the various committees. It then referred the matter to the Committee on Rules and requested that the Committee come up with a ruling at the earliest possible opportunity, so that the issue could be brought back to the floor for appropriate disposition.

Senator Osmeña suggested that the Committee on Rules craft a provision allowing either another committee or majority of the members of the committee to conduct a hearing should the chairman of the committee refuse to do so.

For his part, Senator Angara suggested that the Committee on Rules schedule a hearing so that

M

those interested in the revision of the *Rules* would be able to attend.

The Chair assured Senators Osmeña and Angara that their suggestions would be considered by the chairman of the Committee on Rules in the hearing on the resolution of the issue at hand.

ADJOURNMENT OF SESSION

With the permission of the Body, the Chair adjourned the session until three o'clock in the afternoon of Monday, June 6, 2005.

It was 6:51 p.m.

I hereby certify to the correctness of the foregoing.

OSCAR G. YABES
Secretary of the Senate
[Handwritten signature]

Approved on June 6, 2005