

**Remarks of Rep. Henry A. Waxman**  
**Floor Consideration**  
**H.R. 1108, the Family Smoking Prevention and Tobacco Control Act**  
**July 30, 2008**

This is truly a historic day in the fight against tobacco. As a father, a grandfather, a former smoker, and a lifetime advocate for the public health, I am proud that we have reached this day.

But it took us far too long to get here.

- In 1994, the tobacco executives stood up in my subcommittee and swore, under oath, that nicotine was not addictive.
- In 1996, the FDA tried to regulate tobacco products, but the Supreme Court told them that they needed Congress to give them specific legal authority.
- And now, twelve years later, here we are—finally giving FDA that authority to regulate the leading preventable cause of death in America.

Every one of us has seen the devastating effects of tobacco—through losing someone we love, watching others grow sick, or even feeling the grip of addiction firsthand. Worst of all is watching our children and grandchildren be targeted as the next wave of casualties.

Regulating tobacco is the single most important thing that we can do right now to curb this deadly toll. And FDA is the only agency with the right combination of scientific expertise, regulatory experience, and public health mission to oversee these products effectively.

This legislation will direct FDA:

- to end marketing and sales of tobacco to kids,
- to prevent manufacturers from calling cigarettes “light” or “less dangerous” when they’re not, and
- to require changes to what is in cigarettes, like toxic ingredients such as formaldehyde, benzene, radioactive elements, and other deadly chemicals.

Some have objected that this bill is too big a challenge for an already overburdened FDA. But it’s clear to me that FDA’s recent struggles are primarily a result of years of chronic underfunding.

This does not mean that FDA, with strong and committed leadership, cannot take on the critical role of protecting the country against the harms of tobacco. It simply means that when we give the Agency this new responsibility, we also must give it the resources necessary to do the job—and to do it well.

We have ensured that this will happen. The tobacco program will be fully funded through new user fees—paid for by the industry. That money will go exclusively to the new tobacco center and will be enough for FDA to handle this task well. Furthermore, by doing so, we will ensure that the new tobacco program will have no impact on other programs at the FDA.

In short, we have everything we need to take this historic step: a comprehensive and flexible set of new authorities, and full, certain funding. All we need now is the political will to do the right thing.

The breadth of support for the bill—from AARP to the American Academy of Pediatrics, and from the Southern Baptist Convention to the Islamic Society of North America—shows just how critical this issue is to all Americans. It is also supported by the American Lung Association, the American Heart Association, and the American Cancer Society—the groups that are best situated to understand the damage caused by tobacco.

I also want to note that we have worked hard to accommodate specific concerns we have heard about this bill. In Committee, we made changes to ensure fairness and flexibility for convenience stores, tobacco

growers, and small manufacturers, and worked with the Minority to incorporate their suggestions. Most recently, we worked with members of the Congressional Black Caucus to ensure that menthol cigarettes will be an early focus of the agency and that the agency has the authority to deal with these and other products.

I want to thank my colleague, Tom Davis, the ranking Member of the Oversight Committee, for his strong leadership and dedication to working on this legislation, as well as John Dingell and Frank Pallone for their diligent work in shepherding this bill to the Floor. They have made this bill possible and produced a great victory for all Americans, especially our children.