

Department of Legislative Services
Maryland General Assembly
2009 Session

FISCAL AND POLICY NOTE

Senate Bill 717

(Senator Greenip, *et al.*)

Education, Health, and Environmental Affairs

Health and Government Operations

Disease Prevention - Cancer Reports - Myelodysplastic Syndromes

This bill requires facilities that diagnose or care for patients with Myelodysplastic Syndromes (MDS) to report such diagnoses to the Maryland Cancer Registry.

Fiscal Summary

State Effect: No effect on governmental finances since facilities are already required by regulations to report MDS to the Maryland Cancer Registry.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: The Maryland Cancer Registry is a computerized data system that registers all cases of reportable human cancers diagnosed or treated in Maryland. The Maryland cancer reporting law requires all hospitals, hospital laboratories, free-standing laboratories, radiation treatment centers, and out-of-state laboratories that are licensed in the State to submit data reports of each human cancer either diagnosed or treated in Maryland.

Chapter 251 of 2001 required facilities that diagnose or care for patients with “central nervous system tumors” to report such tumors to the Maryland Cancer Registry, regardless of whether the tumor is malignant or benign.

Regulations require that MDS be reported to the Maryland Cancer Registry.

Background: MDS are a group of diseases, ranging from mild to life-threatening, that affect the bone marrow and blood. In MDS, the bone marrow does not make enough normal blood cells for the body, and the cause is usually unknown. Symptoms of MDS vary, from none to infection or uncontrolled bleeding in severe cases.

Nationally, about 10,000 to 15,000 people are diagnosed with MDS each year. Men are more affected by MDS, and although it can affect people at any age, more than 80% of cases are in people older than age 60.

Treatment depends on the type of MDS a person has, as well as his or her age, overall health, and preferences. Treatment options include supportive care, bone marrow or cord blood transplant, chemotherapy, and newer drug therapies.

Additional Information

Prior Introductions: None.

Cross File: HB 722 (Delegates Costa and Frush) - Health and Government Operations.

Information Source(s): Department of Health and Mental Hygiene, Department of Legislative Services

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