

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE RESOLUTION

No. 830 Session of
2008

INTRODUCED BY SIPTROTH, BELFANTI, BEYER, BRENNAN, CALTAGIRONE,
CAUSER, CLYMER, CREIGHTON, DALEY, DIGIROLAMO, DONATUCCI,
FLECK, FRANKEL, GEIST, GEORGE, GIBBONS, GILLESPIE, GINGRICH,
GRUCELA, HELM, HENNESSEY, HERSHEY, HESS, JAMES, KOTIK, KULA,
MAHONEY, MAJOR, MANTZ, MELIO, MILLARD, MILNE, MOYER, MURT,
MYERS, NAILOR, D. O'BRIEN, PALLONE, PARKER, PAYNE, PHILLIPS,
QUINN, RAMALEY, READSHAW, REICHLEY, ROCK, ROSS, SAINATO,
SANTONI, SAYLOR, SCAVELLO, K. SMITH, SWANGER, VULAKOVICH,
WALKO, J. WHITE, WOJNAROSKI, GOODMAN, RAPP AND HARHART,
JUNE 27, 2008

INTRODUCED AS NONCONTROVERSIAL RESOLUTION UNDER RULE 35,
JUNE 27, 2008

A RESOLUTION

1 Recognizing September 2008 as "Chiari Malformation Month."

2 WHEREAS, Chiari malformation, as recognized by the National
3 Institute of Neurological Disorders and Stroke, includes a
4 complex group of disorders characterized by herniation of the
5 cerebellum; and

6 WHEREAS, The herniated tissue blocks the circulation of
7 cerebrospinal fluid in the brain which can lead to the formation
8 of a cavity within the spinal cord; and

9 WHEREAS, Symptoms of Type I Chiari malformation include:
10 severe headache, dizziness, vertigo, disequilibrium, visual
11 disturbances, difficulty swallowing, heart palpitations, sleep
12 apnea, impaired fine motor skills, chronic fatigue and painful
13 tingling of the hands and feet; and

1 WHEREAS, Because of the complex symptomology, patients with
2 Type I Chiari malformation are frequently misdiagnosed; and

3 WHEREAS, Type II Chiari malformation, also called Arnold-
4 Chiari malformation, is usually accompanied by a
5 myelomeningocele, a form of spina bifida that occurs when the
6 spinal canal and the backbone do not close before birth, causing
7 the spinal cord to protrude through an opening in the back,
8 which can result in partial or complete paralysis below the
9 spinal opening; and

10 WHEREAS, Type III Chiari malformation, the most serious form,
11 results in severe and often irreversible neurological defects;
12 and

13 WHEREAS, Treatment for this disorder is not a certain and
14 definitive path, and medication may ease certain symptoms such
15 as pain, but often surgery is the only treatment available to
16 correct functional disturbances or halt the progression of
17 damage to the central nervous system; and

18 WHEREAS, Until recently, Chiari malformation was regarded as
19 a rare condition, but with the increased use of magnetic
20 resonance imaging, the number of reported cases has risen from
21 200,000 to 2 million Americans; and

22 WHEREAS, New genetic studies support a hereditary tendency
23 with a transmissibility rate of 12%; and

24 WHEREAS, The studies also found that women are three times
25 more likely to be afflicted by the debilitating disorder than
26 men; therefore be it

27 RESOLVED, That the House of Representatives recognize the
28 month of September 2008 as "Chiari Malformation Month" and help
29 promote advocacy for this important cause.