F I S C A L I M P A C T R E P O R T

SPONSOR Trujillo **ORIGINAL DATE** 02/02/07 **LAST UPDATED** **HB** HJM 9

SHORT TITLE Support Cavernous Angioma Research **SB**

ANALYST Hanika Ortiz

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	**FY08**		
	NFI		

(Parenthesis ( ) Indicate Expenditure Decreases)

SOURCES OF INFORMATION
LFC Files

Responses Received From
Health Policy Commission

SUMMARY

Synopsis of Bill

House Joint Memorial 9 urges the State of New Mexico to support research on cavernous angioma, a disease that disproportionately affects Hispanic New Mexicans.

FISCAL IMPLICATIONS

There is no appropriation attached to this legislation.

SIGNIFICANT ISSUES

House Joint Memorial 9 provides the following:

- Cavernous angioma is a devastating blood disease that has enormous consequences for those affected and their families; and
- Cavernous angiomas are formations in the brain that cannot be detected easily except through very specific medical scans; and
- Cavernous angiomas appear to be passed from one generation to the next; and
- Those with a cavernous angioma should not take blood thinners or aspirin, but are rarely aware that they have the disease; and

- Cavernous angiomas are more common in New Mexico than elsewhere because of the concentration of families; and
- A person with a cavernous angioma may go undiagnosed until sudden death or stroke.

PERFORMANCE IMPLICATIONS

The Memorial requests the Department of Health (DOH), Human Services Department (HSD) and the University of New Mexico (UNM) to appoint a committee to study funding sources to support research on cavernous angioma. The Memorial further requests the committee to devise educational campaigns using resources currently available to inform New Mexicans of the dangers and warning signs of cavernous angioma.

The committee will report to the interim legislative Health and Human Services Committee about its findings and educational efforts by November 2008. Copies of this memorial will be transmitted to DOH, HSD and UNM.

OTHER SUBSTANTIVE ISSUES

According to Angioma Alliance, cavernous angiomas are clusters of abnormal blood vessels found in the brain, spinal cord, and rarely in other areas of the body. Cavernous angiomas range in size from microscopic to inches in diameter and typically look like a raspberry. They are little bubbles filled with blood and lined with a layer of cells.

The most common symptom for cavernous angioma is a seizure or there are no symptoms at all. Cavernous angiomas can also cause weakness in the legs or arms, vision problems or memory and attention problems called neurological deficits.

According to Angioma Alliance:

- Angiomas can bleed slowly within the walls of the angioma and remain quite small. A small hemorrhage may not require surgery, but may be reabsorbed by the body. However, continued small hemorrhages in the same cavernous angioma often cause deterioration in function.
- Angiomas can bleed more profusely within the walls of the angioma. This can cause them to grow and put pressure on the surrounding brain tissue.
- Angiomas may bleed through a weak spot in the angioma wall into the surrounding brain tissue. This is called an overt hemorrhage. The risk of hemorrhage is dependent on the number of angiomas. The higher the number, the greater the chance of one or more hemorrhages occurring sometime over a lifetime. Those angiomas that have bled are most likely to bleed again, within the first two years after their initial bleed. A hemorrhage in the brain stem can be life threatening.

Cavernous Angioma Statistics:

- One in 100-200 people have at least one cavernous angioma.
- Thirty percent will develop symptoms.
- Twenty-five to thirty percent are diagnosed under the age of 20.
- Sixty percent are diagnosed between the ages of 20 and 40.
- Ten to fifteen percent diagnosed are over the age of 40.

- Twenty percent with the illness are inherited with a higher rate in Mexican American families.
- A child that has someone with the familial form has a fifty percent chance of inheriting the illness and at least three genes affected by the illness.
- A solitary cavernous angioma can be present at birth or develop later in life.

AHO/csd