

2014-07-10 Louise Slaughter

Christopher Donohue:

Christopher Donohue, and I'm interviewing Congresswoman Louise Slaughter. For the record, could you tell us your name and what you do in Congress?

Louise Slaughter:

Yes. My name is Louise Slaughter. I represent the 25th Congressional District of New York, which, at this point, is wholly within Monroe County, New York, which is the home of Rochester. And I've had districts that stretched all the way to Buffalo and in every re-districting I have been a target. I've survived three. So, I think everybody understands that re-districting is a parlor game now, sort of. It's actually a game of power; but we manage to survive.

I have a degree in microbiology and a Master's degree in public health from the University of Kentucky -- which has helped me an awful lot, although I've certainly not done anything in the health care field. But I do understand the term [laughs] "theory of disease" and it's been very helpful -- not only in genetics, but first I was able to work with outside groups and set up the first Office of Women's Health. At the time I was fortunate to be serving on both the rules committee, where I'm now a ranking member, and the budget committee. And we went through some awful times just trying to set up the Office of Women's Health. And I remember the budget committee hearing when we were putting the budget together and I said, "We're going to put some money in here for women's health." At that time, this was in the 90s -- and I don't think people understand the early 90s, that all research at the National Institutes of Health was done on white men. Now, that people are probably going to find really hard to countenance, which accounted for the fact that there was almost no research done on ovarian cancer, cervical cancer, diseases that mainly affected women. Osteoporosis, I know research, although we spent billions every year to treat it, to try to treat it, we now have about 16 kinds of treatment just for osteoporosis. Now breast cancer research is being done on women as well as men, and we brought in minorities, which is very important. So with the bill we wrote to set up the Office of Women's Health, we specified some things that we felt had been neglected. And we put prostate cancer in there because we cared about our men. Sickle cell anemia, which nobody had done very much about, we wanted that researched more thoroughly -- and that led to the genetics bill, because I was able to get that bill passed, having been on those two committees. But I remember when I first brought it up to the men on the budget committee, and I knew some of their wives had breast cancer. Their comment to me was, "You're asking for a quota system." And we said, "Well, you have a quota already. It's 100% white male." And women are the majority of the population in the United States. We work, we pay taxes, and you can't leave us out any longer because we have hormones.

So having been successful with that, I was approached when the human genome started to be sequenced. Because we felt, and these were woman again we're talking to with some outside groups, as well as the woman who, at that point, was surgeon general -- that we thought that it would be good if public policy, the law, kept up with science for a change. And it never happened. And we wanted to try to do that, but we ran into the roadblock of health care institutions not wanting it done. We had a situation where -- first I should say that the Ashkenazi Jewish women were very instrumental in being able to do this bill at all. Their generosity was

overwhelming. They were, because they allowed themselves to be used basically for the breast cancer gene, and what we found out mostly about that. It was one of the first things that we discovered. There already -- we understood some genetic causes for things like cystic fibrosis and individual diseases, but we knew we'd just not even scratched the surface of that great science of how we are made. In addition to everything else we've learned through genetics is that all of us are 99.99 percent the same. I think if we don't come up with anything else in this world, we all know that and make everybody understand that we could maybe have a lot better society to live in.

But in any case, we wanted to try to do -- but doctors were telling women with breast cancer -- we were losing a Vietnam War of women every year. That same number -- to death from breast cancer -- but doctors were saying to them, "Until this genetic bill gets passed, don't get tested." And we had history from all over the place and discrimination against people, including Livermore Labs that discriminated against persons with sickle cell anemia genes or disposition. Now, our basic premise was this for the law: All of us have bad genes. All of us have between 30 and 40 bad genes. Therefore, all of us were affected by what happened to people because of their genetic make-up. We also knew that having a gene did not necessarily mean that you were going to get the condition or fall in the category of persons with that handicap or disability. And to discriminate against somebody -- 30 or 40 years might change their life in some way, rank is kind of discrimination. And since we were all involved, including the people who owned the health insurance companies and the drug companies as well, we tried to make the point that this is for all of us. What the law basically intended to do was make sure that your genetic information belonged to you, so that you wouldn't be afraid to get the genetic testing you needed to really plan your life and know more about yourself. And second, that you couldn't lose your job because of your genetic make-up.

Now since that time, the Affordable Health Care Act has taken care of that portion to a degree, because pre-existing conditions no longer affect your ability to be insured. But at the time we did this, this was really quite remarkable because this had never come up before. And we found awful cases all over the country of discrimination. So we set out to try to do it with all the great altruistic belief in the world that everybody would want it, and ran into the fact that we couldn't get a hearing. And, to start off, when the Democrats were in charge of the House, I had a wonderful co-sponsor, Congressman Biggert from Illinois, a Republican, who helped me. And when the Republicans were in charge she would take the bill. And when the Democrats got back I would take it. And I certainly need to make it clear that President George H.W. Bush -- George W., sorry, I messed that up. George W. Bush had said many times that he would sign the bill, including once in his State of the Union. And he did. So we are very grateful to him for that.

But what we found out was that it took some doing, trying to get hearings. I went through numbers -- of persons who were Chair of the Energy and Commerce committee to try to get a hearing. But we found out that the drug companies and the health insurers did not want the bill. For one reason, the drug companies like to go through records and find out what were the prevailing diseases and what they should do research on. And I've made it clear I didn't mind if that's what they wanted to do, but they didn't need to know who the people were, or where they worked, or where they lived. We had a very difficult time and we may not have ever been able to pass the bill. So when the Democrats took over in 2007, and the great Nancy Pelosi watched

me try to do that bill forever and was always a co-sponsor, said, "One of the first things we will do is the genetic non-discrimination bill." And we did. And I had the magnificent Ted Kennedy carrying it for me in the Senate -- such a remarkable man. But it passed the Senate unanimously twice before we could even get a hearing over here. Dr. Frist, at the time who was majority leader in the Senate, was a doctor who also believed very strongly in what we were doing. But it was a very heavy lift and know that every two years, our terms are two-year terms, at the end of those two years all legislation dies that's not been passed. Which meant that every single beginning of every term I had to go and get signatures again on that bill. And we would change it and modify bits and pieces. And I, mostly by myself, I would collect the signatures on the floor of people who would sign onto that bill again. So every two years we had a struggle trying really to reach 218 persons that would co-sponsor it, because 218 in the House would have given us an opportunity to go to the floor.

Chris Donohue:

So, you've given a kind of masterful overview of, sort of, the course of the interview. But what I want to do is sort of ask you a series and more detailed questions so that we can get a better sense of the depth. So, for those who are watching at home, and who have no idea about GINA -

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Louise Slaughter:

--And that's almost everybody, we've discovered [laughs].

[talking simultaneously]

Chris Donohue:

That's almost everybody. The knowledge of the bill is --

Louise Slaughter:

89 percent of doctors don't understand that protection is there, and that's unfortunate. And one of the things that we really want to do is make sure that there is more of an education process in medical schools and doctors' organizations -- that they have that protection.

Chris Donohue:

So tell, you know, as part of, the kind of the outreach process which this world history will do, tell everybody what GINA is and what it does. How does it protect you?

Louise Slaughter:

The genetics science is the most wonderful thing in the world because it has the possibility of taking care of diseases that have plagued mankind. It has the possibility and real hope that it will find a cure for cancer. And I have been told by the new head of the human genome project, Dr. Eric Green -- came over to see me -- that they feel that they are very close to being able to turn off [unintelligible] genetically, which is a wonderful thing. But the possibility of working with genetics to relieve things that we never thought we could do, but second to cut down on hospital stays, invasive surgeries -- just the realm of the possible, having genetics. But our job in the Congress was to protect the rights of persons who needed to get the tests; who wanted to find out their genetic make-up. Like for example, letters that we would get from persons who had

Alzheimer's in their family and they wanted to plan for their future by seeing if they carried the genetic predisposition to Alzheimer's; but they were afraid to because if their employer heard about it they could lose their job. And if the health insurers knew about it they could be dropped; and many, many people were. We had some of the saddest stories in the world of people who were discriminated against, but one of the worst, most jarring one, was the one that took place at Livermore Labs against persons with sickle cell anemia.

Chris Donohue:

So could you tell us a little more about -- in 1995 the circumstances that really motivated, you talked about anecdotal evidence, but what was the, I mean, who were the people who were really for this kind of legislation being passed? Is it sort of advocacy groups, other members of Congress?

Louise Slaughter:

No, other members of Congress were not that interested in it, to be frank about it. We always had some that were always sponsors that did understand it. But we ran into an awful lot of members of Congress who thought we were talking about cloning. All kinds of ignorance and crazies, and many who just would not thwart the will of the insurers or drug companies. And that was certainly, I think, the case of the Chairs of the committees that would not even give us a chance to have a hearing, despite the fact that we always had a good number of co-sponsors in the House, and bipartisan co-sponsors as well. So it was -- I seriously doubt if many people would have tried 13 years to do it; but I couldn't turn it loose. The fact was that we knew the genetic promise, the things that we were learning, and most of -- as we got through it, we didn't have Senate sponsors at all. And Craig Venter, if you recall, was one of the persons who was working very hard on the sequencing, went with me to visit Senators and talk about the possibility of this. And we understood that our part of it was really the protection of the human being as they learned how to use this brand new science, which was so helpful and showed such promise with so many things. And once we were able to finally crack that code and get through to people, it made it that much easier. But it was an uphill battle.

Chris Donohue:

Was there a sense from you, either and sort of as to -- in '95, in the early process or even now, that having legislation that specifically addresses genetic information and genetic discrimination might lead to a kind of privileging of that information, or like an exceptionalism that this information is more important than other health information?

Louise Slaughter:

No, no, never. As a microbiologist, I've said to you I believe very strongly in the germ theory of disease. I think the reason that I did this bill was simply that I didn't want to do anything to stop this marvelous science. People were afraid to even be research subjects if the word got out, that they could lose their job -- and let me assure you that this was happening nationwide. We had one railroad that we discovered was taking great mass quantities of blood from some of the workers looking for a genetic link to carpal tunnel; and there isn't one. But they were trying to find it so that they could get out of any liability or anything there. But other people who would have the gene, as I pointed out, might never get the condition; and if they did it would be 30 or 40 years away. And to say to them, and many of them brilliant scientists in some cases, "We're

sorry. We can't use you anymore. You might make our health insurance costs go up." It was really something that I felt had to be addressed, and had to be addressed in Congress. Oh but I should say, if you'll excuse me, that there were states that were a little bit ahead of us as the science progressed; that some of those protections happened in some states before we could get it done here.

Chris Donohue:

And you -- but you certainly thought that even with some of the state restrictions that a national solution [inaudible].

[talking simultaneously]

Louise Slaughter:

Absolutely! It shouldn't be the luck of the draw what state you're born in, whether or not you get coverage, or whether you are beneficial. We have the same thing now, you know, with Affordable Health care, and we've just been fighting the Hobby Lobby case. We've got a new bill on that, because this decision from this court is one of many that we find very distressing. Because no matter how many times Aledo [spelled phonetically] tells me, I know that corporations aren't people.

Chris Donohue:

So, you've mentioned Craig Venter, and we know he was part of the --

Louise Slaughter:

--Francis Collins, I've got to say, that man is the most remarkable man. I'm so happy to have him the head of NIH. He is, in many respects, a renaissance man. He was so wonderful all the way through and he was there every time we needed him. And one of the greatest days for us were they days we finally got the bill passed and we gathered up in the press gallery here in the House. Senator Kennedy was there. It was one of the last things, I think, that he did. He compared the bill to the splitting of the atom. Actually, he said it was the Civil Rights act of this century. Francis Collins said it was the equivalent of splitting the atom -- the science itself, not the bill. Although, let me tell you, I felt like I had split an atom when I finally got this thing done. And remember, all that time I'm doing a lot of other legislation as well.

Chris Donohue:

So what did Francis bring in particular that you thought was really helpful?

Louise Slaughter:

His incredible intellect. The man was so far seeing. He could see around corners on what we were doing with genetics -- and his great ability to transmit that to other people. I mean, he's a jewel. I remember this last government shutdown, which was so awful, do you know that we have five Nobel laureates that work for the federal government and four of them were declared non-essential? Which was one of the biggest, that was Ted Cruz's, I think, Senator Cruz's gift to America -- that shutdown. But it set back a lot of research. And as a scientist, I know you can't turn that off and on like a faucet and we're losing a lot of our great scientists in this country.

Francis Collins is a very unique person, and having him at the helm there, I think brings a lot of people into the field and wanting to work for the government because of him.

Chris Donohue:

Is there one kind of amusing, revealing anecdote for people who don't know Francis?

Louise Slaughter:

Yes, well, I went out to NIH one day and Dr. Zerhouni [spelled phonetically] was there, and he was remarkable and what we talked about with him -- and to digress here for a moment, as I often do, was the fact that genetics and personalized medicine was so important. And he told me, Dr. Zerhouni, that 80 percent of the persons on Lipitor were not benefited by it because of their genetic make-up. These are the great things we're finding out, breaking through, with genetics that we can give you the specific treatment for your cancer. The kind of thing that you will respond to better because of your genetic make-up. So, but I went out to NIH one day, I think Dr. Zerhouni was leaving, and they had this trio. I think Francis Collins was on guitar; Dr. Zerhouni, I think, was playing piano, and they were playing jazz -- which brought me to another thing, is that I also do the arts caucus here to keep National Endowment over the arts alive. And we've discovered -- we haven't, University of California, Davis discovered that doctors who understand what they're hearing in a stethoscope-studied music. And I sat there and watched those three great scientists with their musical ability knowing they were using both sides of the brain -- which I highly recommend for all Americans [laughs]. But the benefit of the fact that -- and I even talked to Bill Clinton once, because he was a great saxophonist, and you find most successful people in many, many fields have studied music, which has nothing in the world to do with what you want to talk about.

Chris Donohue:

No, but that's perfectly fine.

[talking simultaneously]

Louise Slaughter:

--But, in the fact we're all connected in so many ways.

Chris Donohue:

No, I think that one of the things that sometimes doesn't come across in written theories is these kinds of personal things that make sense as to why these individuals have such dynamic personalities -- that was done. So you said that Francis had almost a prophetic ability; he could see around corners.

Louise Slaughter:

Oh, the possibility of what was happening. And it was so remarkable, and it was so wonderful that he worked for the government and we got there first. Because I had been very much concerned about patenting of genes and what's happened with women now, with breast cancer, having to pay a certain company to allow them to use some of the samples that they need to check theirs has really been awful. It's been very bad.

Chris Donohue:

So, not only Francis, but if you think about, you know, people like Kathy Hudson, for example?

Louise Slaughter:

Oh yes.

Chris Donohue:

So, then tell us a little bit about her and, you know, her role.

Louise Slaughter:

Oh, women scientists are really, absolutely essential in what we've done here. Only because, again, we are the majority. When I first got to Congress, you may be surprised to know that I had to do an amendment to a bill to allow women scientists at NIH to be mentored, to be asked to the right meetings, and to be given grants -- because everybody understands that there are some great scientific breakthroughs and some Nobel laureates. I had a female component in this study and in their work who was completely ignored. They even say that Einstein's wife was really helpful in the Theory of Relativity, and he shared the money with her from the Nobel Prize. But so we've known that forever -- that women trying to do the rights of women and women's rightful place in this society, along with everything else that we're doing. The women scientists of today really owe more than they think they do, I think, to what we were doing here in those early days of making it possible for them to do good work and be recognized for it.

Chris Donohue:

Right. So we talked a little bit, we talked a lot, actually a lot about Francis. But so, and you've discussed sort of what sort of the role of the insurance companies. So what was, you know, what were really the principal impediments --

Louise Slaughter:

They were.

Chris Donohue:

-- to the bill? So it was the insurance companies [unintelligible]?

[talking simultaneously]

Louise Slaughter:

Right, absolutely. Because we couldn't get hearings; because of their influence over members of Congress and the Chairs, basically those committees.

Chris Donohue:

And people also, like the, it was the Chamber of Commerce involved in any of this?

Louise Slaughter:

Let me tell you something. I'm having the same thing now. We're trying to save eight classes of antibiotics for human beings because of the resistant bacteria now. I don't know if you saw the article yesterday in the New York Times about tuberculosis. And we've carried this bill, I

think, for about eight years through this preservation. We have over 450 outside groups; all scientific groups supporting us. If you trust, some major scientists have told us that in 10 years strep throat could be fatal if we don't stop the overuse of antibiotics and making them useless. So I'm [unintelligible] but in that case I'm fighting the government, my government. The FDA, the USDA, right? [laughs] So, and we can't always say it was outside influence -- although it may be outside influences on them. I really don't know about that. But all I can tell you is that we cannot stop the overuse of -- 80 percent of the antibiotics produced in the United States are fed to cattle and livestock every day, sick or not, so for growth -- so they get fatter and get more money at market.

Chris Donohue:  
Right, and this is an --

Louise Slaughter:  
So why don't, you know, it didn't come from any sources, but whatever the powers that be. It depends -- I'm sure you noticed the difference when Nancy Pelosi was Speaker of the House; we passed more legislation. It was considered to be the most productive Congress ever. Then we lose; and then we go in in 2011, and it is the worst Congress ever. We don't do anything much anymore. We pass one-House bills here and pray that the Senate will not take them up because well none of them should ever become law.

Chris Donohue:  
Right.

Louise Slaughter:  
And so that's -- and I'm really getting way too far out of --

Chris Donohue:  
No, no, no, that's fine. I can just redirect you. It's certainly okay. So you certainly don't think the bill would be passed today?

Louise Slaughter:  
Oh, it wouldn't even come to the floor today. No, it wouldn't go to the committee.

Chris Donohue:  
Right.

Louise Slaughter:  
As our -- the reason I brought up the antibiotics bill is to spite that again, is human health for every lasting one of us, every man, woman and child. We can't get a hearing on that.

Chris Donohue:  
Right. So, when the bill was finally close to being passed, and it kind of hit that sort of legislative sweet spot, could you tell us a bit about the dynamics that allowed that to happen?

Louise Slaughter:



Well, let me tell you some about another bill because it's very instructive. We carried a bill called the STOCK Act, and it was to prohibit members of Congress and their staffs, from trading on the market on information they had from here that nobody else had, right? For at least four terms, six, seven years, I never had more than six co-sponsors. 60 Minutes took it up one Sunday night. I didn't even know it was going to be on. The next day, Monday, the House was in session. I was sitting out on the floor. Everybody came in rushing over to me, "I've signed onto your bill." "Which one?" I said. We had 198 co-sponsors before the next day was over. It went through both the House and Senate like a hot knife through butter, right? But it didn't have one piece in it. Actually, the first case is being heard now on the Freedom of Stock Act. But it had one provision for a thing called political intelligence, which is where 402 million dollars a year is unregistered. Senator Lieberman took it out. Senator Grassley put it back. It came back over to the House. Eric Cantor took it out and put it on suspension calendar and his opponent used it against him in the recent primary that he lost. These are stories that only we who are involved will tell you, because we know it; but that's often the way things work. But so we passed a bill that was effortless, that everybody wanted to be on, but something that affects everybody in the world with antibiotics, we can't get a hearing on.

Chris Donohue:  
Right, so this --

Louise Slaughter:  
Well, maybe I can get 60 Minutes to take it up. What do you think?

Chris Donohue:  
I think that's great idea. I don't want to die of strep throat [laughs].

Louise Slaughter:  
No, you don't.

Chris Donohue:  
[laughs] So, you've talked about this -- so what in terms of getting GINA passed? I mean, what was the really specific kind of fine-grained merit of getting this bill passed?

Louise Slaughter:  
There is none.

Chris Donohue:  
There is none?

Louise Slaughter:  
The fact is that we tried every two years again and we would get more sponsors. We would pick up three or four or five more. The reason we got it passed was that Nancy Pelosi became the Speaker of the House. That's it.

Chris Donohue:  
So there was no --

Louise Slaughter:  
As I told you, the Senate had already passed it twice.

Chris Donohue:  
So there was no kind of --

Louise Slaughter:  
No.

Chris Donohue:  
-- tipping point? Ah, there was no kind of tipping point?

Louise Slaughter:  
No, there was no public outcry about -- good heavens, protect my genetic make-up, ever. And as we point out, 89 percent of -- some polls showed 89 percent of physicians, practicing physicians, are not aware of this bill. They are in Rochester.

Chris Donohue:  
So you actually just pointed out something very interesting. So why do you think that the discussion of things like genetic discrimination and knowledge of genetics, even among physicians and clinicians, is so low and --

Louise Slaughter:  
I have no idea. I mean, I passed the legislation. It's up to them to learn about it.

Chris Donohue:  
[laughs] That's actually a very good sound bite. We could --

Louise Slaughter:  
-- Exactly, I don't have to go door to door and say, "Look what we've done lately." It's their obligation to keep up with what's going on in science.

Chris Donohue:  
Right, right. And so, when the bill was finally passed was there a moment that you can remember that you were reflecting back that you can kind of encapsulate that says, "Ah, I've finally done it. This is finally" --

Louise Slaughter:  
The day it was passed.

Chris Donohue:  
The day it was passed? What were your feelings at that time?

Louise Slaughter:

Relief. Relief, and so happy. We had not had -- Senator Kennedy was a giant of a man and to have him carrying that bill in the Senate was a great honor for me. He just was extraordinary in every way. So when that came out as the Kennedy/Slaughter bill, it was pretty remarkable. But we never had a problem in the Senate, however, they were -- even under the Republicans they passed it, almost unanimously every time.

Chris Donohue:

I think there was one person who voted against it.

Louise Slaughter:

We had, I think when we finally got it through the House we got very few no votes. So all we had to ever have done, I think, was to get it to the floor.

Chris Donohue:

So in terms of your accomplishments as a legislator, how would you sort of rank GINA in terms of you -- what you think about its effects and legacy and things like that?

Louise Slaughter:

There are a couple things that I'm proud of. One is that I've got an extraordinary staff; and we work hard. We work really hard. But we were able to pass this bill with Republicans in charge. That's not happening here now. But if I were to rank these, I don't know exactly what I'd have to say to that. When I talk about savings 16,000 service men in Iraq that ranks very high in my book, but GINA is very good. If I can save some antibiotics that's going to be pretty wonderful. But you know, the nicest thing is that members of Congress do these things. Nobody will ever know my name, but they may benefit from the work that we've done. And that's what counts. We have a chance here. Those of us who are lucky enough to be sitting here by our neighbors -- we have a chance here to make it better and that's all we can ask for, is to be able to do what we came to do -- make it better.

Chris Donohue:

So, do you think, and given that there are various restrictions on the scope of GINA, for example, it doesn't cover, say, life insurance --

Louise Slaughter:

-- We're open to anything -- changes, but we don't have any figures at all that there is a problem there. We have talked to the military and they're working on it as we speak. It didn't require legislation at all, what they're doing. But we've not seen any problems in life insurance. As a matter of fact, almost every day I hear about life insurance on television and they can practically give it to you on your deathbed; but I've not heard of anybody being turned down for life insurance because of their genetic make-up.

Chris Donohue:

Or long term care insurance?

Louise Slaughter:

Not that either. See, pre-existing conditions in insurance don't exist anymore -- as long as we can hold onto the health care bill.

Chris Donohue:

Right, that's something, actually, that you should talk about in more detail. I mean, how has the ACA kind of changed the landscape, in terms of things like genetic discrimination [unintelligible]?

[talking simultaneously]

Louise Slaughter:

--It's made an enormous difference. For one thing, the cost of health care is going down. The fact that we can cover more people; we're the only industrial country of the face of the Earth that did not provide health care for our people. And it was a terrible handicap to international companies that their corporations didn't have to worry about a health care bill. Most Americans got their health care through their employers. Frankly, if I'd had my choice I would rather have gone to single-payer. That would have made a lot more sense to me and I think we will achieve that, particularly because so many states -- because of the Supreme Court. Remember, it was Supreme Court action that said states did not have to expand Medicaid. That great Supreme Court once again here. And that may help us get to single-payer a little faster.

Chris Donohue:

Right, so --

Louise Slaughter:

I'm about used up here, you all about through? I've got to go on the floor with a rule. Could you give me a time limit? I have to put a rule on the floor at 12:00 p.m.

Chris Donohue:

All right, okay. So, I suppose in that instance, is there anything that you want to say, sort of, about your role in GINA? About anything that we've talked about today?

Louise Slaughter:

It was a privilege. It was a privilege. It took a long, long time. And I guess the only thing you could say that I could bring to that would be persistence. Because a legislator is not defeated because their bill doesn't pass, as long as they can start over the next day to try again; and as long as you're getting better at it, you get more and more people sponsored, that's what you do.

Chris Donohue:

Right, so that's basically the moral of the story is persistence.

Louise Slaughter:

Right. I think so, yeah. It takes more education than it should. If we had the kind of media that we had that I grew up with -- that did those great documentaries on harvest of shame, about migrant workers, and night falls and the Cumberlands, and all those great things about what we were doing -- but we don't have that anymore. It's not an education purpose.

Chris Donohue:  
I think that's a great note to end on in terms of persistence.

Louise Slaughter:  
With the exception of PBS.

Chris Donohue:  
Right, with the exception of PBS.

Louise Slaughter:  
And 60 Minutes. I will forever be grateful to 60 Minutes.

Chris Donohue:  
So, persistence, and the, what is it, the media should shape up its act [laughs].

Louise Slaughter:  
Well, no, everybody thinks that. It's not going to happen.

Chris Donohue:  
[laughs]

Louise Slaughter:  
I'm not going to count on that anymore.

Chris Donohue:  
All right. I think that's a great --

Louise Slaughter:  
-- But I do want physicians to understand those protections are there. Yeah.

Chris Donohue:  
All right, I think that's a great place to end.

Louise Slaughter:  
Thank you.

Chris Donohue:  
With a challenge to the physicians.

Louise Slaughter:  
Thank you very much.

Chris Donohue:  
Thank you. It's been a pleasure.

Louise Slaughter:  
My pleasure.

[end of transcript]